KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 34611
Name: Justin Energy Corporation
Address 1: 40971 W 247TH ST.
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 4047
Contact Person: Victoria Davis
Phone: (785) 248-1237
Lease Name: HOWLIER
Well Number: 3

API No.: 15-121-23810-00-01
Permit No: E27608.1
Reporting Year: 2023
(January 1 to December 31)

SE - SW - SE - SW Sec. 11 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
135 feet from ☐ N / ☑ S Line of Section
3307 feet from ☑ E / ☐ W Line of Section
County: Miami

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 550 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 40 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0	0	0	0	31
February	1110	400	0	0	28
March	1220	400	0	0	31
April	1180	400	0	0	30
May	1230	400	0	0	31
June	1195	400	0	0	30
July	1225	400	0	0	31
August	1235	400	0	0	31
September	1186	400	0	0	30
October	1200	400	0	0	31
November	1190	400	0	0	30
December	1185	400	0	0	31
TOTAL	13156		0		

Submitted Electronically