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 # 9292
Name: Scheck, Timothy dba Scheck Oil Operation
Address 1: 211 S FRONT ST
Address 2:
City: RUSSELL State: KS Zip: 67665 + 3011
Contact Person: Jeremy Ulrich
Phone: (785) 483-4096
Lease Name: CATHERINE A
Well Number: 2

API No.: 15-051-04023-00-01
Permit No: D21548.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NW - NE Sec. 16 Twp. 13 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
4972 feet from ☐ N / ☑ S Line of Section
1385 feet from ☑ E / ☐ W Line of Section
County: Ellis

I. Injection Fluid:

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

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 350 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	4805				31
February	4340				28
March	4805				31
April	4650				30
May	4805				31
June	4650				30
July	4805				31
August	4805				31
September	4650				30
October	4805				31
November	4650				30
December	4805				31
TOTAL	56575		0		

Submitted Electronically