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 # 32296
Name: Cox, William P. & Lisa A. dba B & L Oil
Address 1: 2367 KS HWY 58
Address 2:
City: MADISON State: KS Zip: 66860 + 8002
Contact Person: WILLIAM P. COX
Phone: (620) 4376246
Lease Name: NISBET W
Well Number: B 1

API No.: 15-073-01066-00-01
Permit No: E27956.1
Reporting Year: 2023
(January 1 to December 31)

____ - ____ - N2 - NW Sec. 6 Twp. 24 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3990 feet from ☐ N / ☑ S Line of Section
4700 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 850 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 750 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	3840	710			31
February	3820	710			28
March	3830	710			30
April	3890	710			30
May	3765	710			31
June	3880	710			30
July	3850	710			31
August	3865	710			31
September	3870	710			30
October	3875	710			31
November	3895	710			30
December	3860	710			31
TOTAL	46240		0		

Submitted Electronically