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 # 33904
Name: Sauder Oil Co., LLC
Address 1: BOX 365
Address 2:
City: MADISON State: KS Zip: 66860 + 0365
Contact Person: Kelly
Phone: (620) 437-2288
Lease Name: HUBER
Well Number: 34

API No.: 15-073-01018-00-01
Permit No: D27183.0
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NE - NW Sec. 27 Twp. 22 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
4378 feet from ☐ N / ☑ S Line of Section
3824 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: 200 psi Injection Zone: TONGANOXIE
Maximum Authorized Injection Rate: 800 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	3105	100	0	0	31
February	2800	100	0	0	28
March	3103	100	0	0	31
April	3000	100	0	0	30
May	3116	100	0	0	31
June	3009	100	0	0	30
July	3100	100	0	0	31
August	3119	100	0	0	31
September	3000	100	0	0	30
October	3100	100	0	0	31
November	3020	100	0	0	30
December	3107	100	0	0	31
TOTAL	36579		0		

Submitted Electronically