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 # 34545
Name: ELM III Operating Company LLC
Address 1: 1249 E. 33RD ST
Address 2:
City: EDMOND State: OK Zip: 73013 + 6307
Contact Person: Tripp Markwell
Phone: (405) 2320418
Lease Name: BROTHERS OWWO
Well Number: 2

API No.: 15-035-00832-00-01
Permit No: D21752.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NW - SW Sec. 31 Twp. 31 S. R. 6 ☑ E ☐ W
(Q/Q/Q/Q)
2317 feet from ☐ N / ☑ S Line of Section
4323 feet from ☑ E / ☐ W Line of Section
County: Cowley

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: 250 psi Injection Zone: STALNAKER
Maximum Authorized Injection Rate: 700 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	1200				31
February	1200				28
March	1299				31
April	1200				30
May	1200				31
June	1500				30
July	900				31
August	1500				30
September	1500				30
October	1500				31
November	1500				30
December	1500				31
TOTAL	15999		0		

Submitted Electronically