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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: (918) 492-9797
Lease Name: DIETS
Well Number: 4

API No.: 15-185-12451-00-01
Permit No: D06958.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - SE - SE Sec. 6 Twp. 21 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
406 feet from ☐ N / ☑ S Line of Section
365 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: Arbuckle
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	7950	30	0	0	31
February	7181	30	0	0	28
March	7950	30	0	0	31
April	7908	30	0	0	30
May	8172	30	0	0	31
June	7908	30	0	0	30
July	8136	30	0	0	31
August	7876	30	0	0	31
September	7055	30	0	0	30
October	7699	30	0	0	31
November	7347	30	0	0	30
December	8196	30	0	0	31
TOTAL	93378		0		

Submitted Electronically