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 # 34762
Name: James Production, Inc.
Address 1: 1334 GROUSE RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 4406
Contact Person: Jim Vernon
Phone: (620) 625-3536
Lease Name: VERNON FEE
Well Number: 4

API No.: 15-207-28496-00-00
Permit No: D31561.0
Reporting Year: 2023
(January 1 to December 31)

____ - ____ - ____ - NE Sec. 6 Twp. 24 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
515 feet from ☑ N / ☐ S Line of Section
1875 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: ARBUCKLE
Maximum Authorized Injection Rate: 3000 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	160	10			31
February	160	10			28
March	160	10			31
April	160	10			30
May	160	10			31
June	160	10			30
July	160	10			31
August	160	10			31
September	160	10			30
October	160	10			31
November	160	10			30
December	160	10			31
TOTAL	1920		0		

Submitted Electronically