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 # 31458
Name: HJ, Inc.
Address 1: 330 INDUSTRIAL DR
Address 2:
City: GARDEN CITY State: KS Zip: 67846 + 8144
Contact Person: Kenneth Lang
Phone: (620) 275-2005
Lease Name: WALLACE
Well Number: 4

API No.: 15-081-20762-00-01
Permit No: D28158.0
Reporting Year: 2023
(January 1 to December 31)

SW - SW - NE - NE Sec. 30 Twp. 30 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
4028 feet from ☐ N / ☑ S Line of Section
1250 feet from ☑ E / ☐ W Line of Section
County: Haskell

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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	4400				31
February	500				28
March	0				
April	4500				30
May	2700				31
June	1200				30
July	0				
August	0				
September	1400				30
October	1800				31
November	1800				30
December	1600				31
TOTAL	19900		0		

Submitted Electronically