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 # 35346
Name: Marshall Oil, LLC
Address 1: 304 E. 9TH ST.
Address 2: PO BOX 389
City: EUREKA State: KS Zip: 67045 + 0389
Contact Person: b
Phone: (620) 750-0058
Lease Name: KIRK
Well Number: 6

API No.: 15-073-23130-00-01
Permit No: D34100.0
Reporting Year: 2023
(January 1 to December 31)

____ - NW - SW - NE Sec. 15 Twp. 25 S. R. 8 ☑ E ☐ W
(Q/Q/Q/Q)
3630 feet from ☐ N / ☑ S Line of Section
2310 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: 350 psi Injection Zone: TONGANOXIE
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	3100	0			31
February	2800	0			28
March	3100	0			31
April	3000	0			30
May	3100	0			31
June	3000	0			30
July	3100	0			31
August	3000	0			30
September	3100	0			30
October	3100	0			31
November	3000	0			30
December	3100	0			31
TOTAL	36500		0		

Submitted Electronically