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: bm
Phone: (620) 750-0058
Lease Name: ORLAND NEWBY
Well Number: 4

API No.: 15-205-21426-00-00
Permit No: D20758.0
Reporting Year: 2023
(January 1 to December 31)

SW - SW - SW - SE Sec. 3 Twp. 30 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
53 feet from ☐ N / ☑ S Line of Section
2397 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 150 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	200			31
February	3000	200			28
March	3100	200			31
April	3000	200			30
May	3100	200			30
June	3000	200			30
July	3100	200			31
August	3000	200			30
September	3100	200			30
October	3100	200			31
November	3000	200			30
December	3100	200			31
TOTAL	36700		0		

Submitted Electronically