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 # 8061
Name: Oil Producers, Inc. of Kansas
Address 1: 1710 WATERFRONT PKWY
Address 2:
City: WICHITA State: KS Zip: 67206 + 6603
Contact Person: MELODY FLETCHER
Phone: (316) 6810231
Lease Name: WATSON
Well Number: 2

API No.: 15-151-21685-00-00
Permit No: D24324.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - SW - SW Sec. 8 Twp. 29 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
1030 feet from ☐ N / ☑ S Line of Section
4224 feet from ☑ E / ☐ W Line of Section
County: Pratt

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: VIOLA,ARBUCKLE
Maximum Authorized Injection Rate: 5000 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	840	0			31
February	1463	0			28
March	770	0			31
April	220	0			30
May	705	0			31
June	462	0			30
July	0	0			0
August	700	0			31
September	160	0			30
October	578	0			31
November	458	0			30
December	560	0			31
TOTAL	6916		0		

Submitted Electronically