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 # 33816
Name: Curry, Gregg
Address 1: 1986 310TH ST
Address 2:
City: MADISON State: KS Zip: 66860 + 8023
Contact Person: Gregg Curry
Phone: (620) 437-6071
Lease Name: SCHMOLZI
Well Number: 1

API No.: 15-073-19575-00-02
Permit No: E19909.1
Reporting Year: 2023
(January 1 to December 31)

____ - NE - SW - SW Sec. 33 Twp. 22 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
1015 feet from ☐ N / ☑ S Line of Section
3983 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: 750 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	2400	150			31
February	2400	150			28
March	2400	150			31
April	2400	150			30
May	2400	150			31
June	2400	150			30
July	2400	150			31
August	2400	150			31
September	2400	150			30
October	2400	150			31
November	2400	150			30
December	2400	150			31
TOTAL	28800		0		

Submitted Electronically