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 # 5386
Name: Production Drilling, Inc.
Address 1: 1023 RESERVATION RD
Address 2:
City: HAYS State: KS Zip: 67601 + 3982
Contact Person: Nick Gabel
Phone: (785) 625-1189
Lease Name: SCHOELLER
Well Number: 1

API No.: 15-163-22211-00-01
Permit No: D24587.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - NE - NE Sec. 31 Twp. 7 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
4363 feet from ☐ N / ☑ S Line of Section
367 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 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	3565				31
February	3220				28
March	3565				31
April	3450				30
May	3565				31
June	3450				30
July	3565				31
August	3565				31
September	3450				30
October	3565				31
November	3450				30
December	3565				31
TOTAL	41975		0		

Submitted Electronically