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 # 36006
Name: Superior Oilfield Services LLC
Address 1: 4601 E DOUGLAS AVE STE 150
Address 2: Apt 2B
City: WICHITA State: KS Zip: 67218 + 1031
Contact Person: Jason M Town
Phone: (913) 594-2703
Lease Name: WINGERT
Well Number: I-2

API No.: 15-121-31598-00-00
Permit No: E32765.7
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NE - NW Sec. 9 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4622 feet from ☐ N / ☑ S Line of Section
3012 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 700 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 40 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	620	450			31
February	560	450			28
March	620	450			31
April	600	450			30
May	620	450			31
June	600	450			30
July	620	450			31
August	620	450			31
September	600	450			30
October	620	450			31
November	600	450			30
December	620	450			31
TOTAL	7300		0		

Submitted Electronically