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 # 36042
Name: MW Oil, Inc
Address 1: 3422 N BEACH CLUB CIR
Address 2:
City: WICHITA State: KS Zip: 67205 + 2532
Contact Person: Miles Wedel
Phone: (316) 616-4175
Lease Name: LEIKER
Well Number: D-4

API No.: 15-051-22402-00-01
Permit No: E15655.5
Reporting Year: 2024
(January 1 to December 31)

____ - NW - SE - SW Sec. 17 Twp. 15 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
936 feet from ☐ N / ☑ S Line of Section
3748 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 1500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 750 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	0				
February	0				
March	0				
April	0				
May	0				
June	0				
July	0				
August	0				
September	0				
October	0				
November	0				
December	0				
TOTAL	0		0		

Submitted Electronically