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 # 35368
Name: Jones Oil Exploration, LLC
Address 1: PO BOX 68
Address 2:
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: Matt Jones
Phone: (620) 725-3636
Lease Name: FULSOM B
Well Number: 1 SWD

API No.: 15-019-27506-00-00
Permit No: D32153.0
Reporting Year: 2024
(January 1 to December 31)

____ - NW - NW - NE Sec. 17 Twp. 33 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
5097 feet from ☐ N / ☑ S Line of Section
1972 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 500 psi Injection Zone: LAYTON
Maximum Authorized Injection Rate: 700 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	4650	250	0	0	31
February	4350	250	0	0	29
March	4650	250	0	0	31
April	4500	250	0	0	30
May	4650	250	0	0	31
June	4500	250	0	0	30
July	4650	250	0	0	31
August	4650	250	0	0	31
September	4500	250	0	0	30
October	4650	250	0	0	31
November	4500	250	0	0	30
December	4650	250	0	0	31
TOTAL	54900		0		

Submitted Electronically