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 # 35346
Name: Marshall Oil, LLC
Address 1: 304 E. 9TH ST.
Address 2: PO BOX 389
City: EUREKA State: KS Zip: 67045 + 0389
Contact Person: Victoria Davis
Phone: (620) 750-0058
Lease Name: DON ELLISON
Well Number: 2

API No.: 15-207-25824-00-00
Permit No: E25866.5
Reporting Year: 2024
(January 1 to December 31)

SW - NW - SW - SE Sec. 10 Twp. 26 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
800 feet from ☐ N / ☑ S Line of Section
2603 feet from ☑ E / ☐ W Line of Section
County: Woodson

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: None
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 300 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	3100	250	0	0	31
February	2800	250	0	0	29
March	3100	250	0	0	31
April	4500	250	0	0	30
May	3100	250	0	0	31
June	4500	250	0	0	30
July	3100	250	0	0	31
August	3100	250	0	0	31
September	4500	250	0	0	30
October	3100	250	0	0	31
November	4500	250	0	0	30
December	3100	250	0	0	31
TOTAL	42500		0		

Submitted Electronically