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 # 34047
Name: Ron-Bob Oil LLC
Address 1: 211 W 16TH ST
Address 2:
City: NEOSHO FALLS State: KS Zip: 66758 + 3000
Contact Person: RONALD GERMAN
Phone: (620) 363-1350
Lease Name: LAWRENCE BARR
Well Number: 2-W

API No.: 15-207-25573-00-00
Permit No: E25712.2
Reporting Year: 2024
(January 1 to December 31)

____ - SE - NW - NW Sec. 20 Twp. 26 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
4580 feet from ☐ N / ☑ S Line of Section
4513 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: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 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	0				0
February	0				0
March	0				0
April	212				30
May	307				31
June	300				30
July	267				31
August	137				31
September	130				30
October	125				31
November	125				30
December	140				31
TOTAL	1743		0		

Submitted Electronically