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 # 30211
Name: Coats Energy, Inc.
Address 1: PO BOX 744
Address 2:
City: WICHITA State: KS Zip: 67201 + 0744
Contact Person: Casey Coats
Phone: ( 316 ) 655-1997
Lease Name: KNOEFFLER
Well Number: 3

API No.: 15-083-20945-00-01
Permit No: D24297.0
Reporting Year: 2024
*(January 1 to December 31)*

____ - N2 - SW - SE Sec. 10 Twp. 23 S. R. 24 ☐ E ☑ W
*(Q/Q/Q/Q)*
990 feet from ☐ N / ☑ S Line of Section
1950 feet from ☑ E / ☐ W Line of Section
County: Hodgeman

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 47000 mg/l Specific Gravity: ____ Additives: ____
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 0 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 13250 | 0 | | | 30 |
| February | 12685 | 0 | | | 29 |
| March | 14105 | 0 | | | 31 |
| April | 13195 | 0 | | | 29 |
| May | 14105 | 0 | | | 31 |
| June | 13650 | 0 | | | 30 |
| July | 12575 | 0 | | | 31 |
| August | 14105 | 0 | | | 31 |
| September | 13650 | 0 | | | 30 |
| October | 15345 | 0 | | | 31 |
| November | 14595 | 0 | | | 30 |
| December | 15345 | 0 | | | 31 |
| ***TOTAL*** | 166605 | | 0 | | |

Submitted Electronically