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 # 33642
Name: D & R Oil, Inc.
Address 1: 2287 KIOWA RD
Address 2: PO BOX 241
City: GALVA State: KS Zip: 67443 + 0241
Contact Person: Emma S Perera
Phone: (620) 755-8834
Lease Name: DRUM
Well Number: 2

API No.: 15-113-01308-00-02
Permit No: E06760.1
Reporting Year: 2024
(January 1 to December 31)

NE - NW - NW - NE Sec. 35 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
4966 feet from ☐ N / ☑ S Line of Section
2309 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 300 psi Injection Zone: VIOLA
Maximum Authorized Injection Rate: 600 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		0	0
February	0	0		0	0
March	0	0		0	0
April	0	0		0	0
May	0	0		0	0
June	0	0		0	0
July	0	0		0	0
August	0	0		0	0
September	0	0		0	0
October	0	0		0	0
November	0	0		0	0
December	0	0		0	0
TOTAL	0		0		

Submitted Electronically