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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: (918) 492-9797
Lease Name: BASE
Well Number: 6-B

API No.: 15-155-20743-00-00
Permit No: D20349.0
Reporting Year: 2024
(January 1 to December 31)

____ - NW - NW - SE Sec. 26 Twp. 23 S. R. 4 ☐ E ☑ W
(Q/Q/Q/Q)
2414 feet from ☐ N / ☑ S Line of Section
2341 feet from ☑ E / ☐ W Line of Section
County: Reno

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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 12000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	94793	0	0	0	31
February	90326	0	0	0	29
March	94828	0	0	0	31
April	93437	0	0	0	30
May	89860	0	0	0	31
June	91107	0	0	0	30
July	93001	0	0	0	31
August	95933	0	0	0	31
September	93620	0	0	0	30
October	98149	0	0	0	31
November	94737	0	0	0	30
December	98079	0	0	0	31
TOTAL	1127870		0		

Submitted Electronically