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 # 36041
Name: M. K. Fuhrman LLC
Address 1: 12500 302ND RD
Address 2:
City: LANCASTER State: KS Zip: 66041 + 9128
Contact Person: Victoria Davis
Phone: (913) 370-0997
Lease Name: MORRIS WEST
Well Number: 16 W

API No.: 15-091-22571-00-00
Permit No: E25403.21
Reporting Year: 2024
(January 1 to December 31)

____ - SE - NW - SW Sec. 20 Twp. 14 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1933 feet from ☐ N / ☑ S Line of Section
3985 feet from ☑ E / ☐ W Line of Section
County: Johnson

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: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 250 psi Injection Zone: Bartelsville
Maximum Authorized Injection Rate: 15 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	400	175	0	0	31
February	420	175	0	0	29
March	400	175	0	0	31
April	425	175	0	0	30
May	400	175	0	0	31
June	425	175	0	0	30
July	400	175	0	0	31
August	400	175	0	0	31
September	425	175	0	0	30
October	400	175	0	0	31
November	425	175	0	0	30
December	400	175	0	0	31
TOTAL	4920		0		

Submitted Electronically