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 # 32025
Name: Greenwood Resources L.L.C.
Address 1: PO BOX 847
Address 2:
City: PRATT State: KS Zip: 67124 + 0847
Contact Person: Kenneth C Gates
Phone: (620) 672-2531
Lease Name: ELLIS
Well Number: 51 W

API No.: 15-073-19829-00-01
Permit No: E04711.6
Reporting Year: 2024
(January 1 to December 31)

____ - NE - SW - SE Sec. 26 Twp. 23 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
1023 feet from ☐ N / ☑ S Line of Section
1662 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 1100 psi Injection Zone: MISSISSIPPIAN

Maximum Authorized Injection Rate: 500 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	5766	0	0	0	31
February	5208	0	0	0	28
March	5766	0	0	0	31
April	5580	0	0	0	30
May	5766	0	0	0	31
June	5580	0	0	0	30
July	5766	0	0	0	31
August	5766	0	0	0	31
September	5580	0	0	0	30
October	5766	0	0	0	31
November	5580	0	0	0	30
December	5766	0	0	0	31
TOTAL	67890		0		

Submitted Electronically