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 # 32079
Name: Leis, John E.
Address 1: 1410 150th RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 9111
Contact Person: Matt Leis
Phone: (620) 212-0752
Lease Name: HAEN
Well Number: 4

API No.: 15-207-22979-00-01
Permit No: E24079.2
Reporting Year: 2024
(January 1 to December 31)

____ - NW - SW - NE Sec. 15 Twp. 25 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
3630 feet from ☐ N / ☑ S Line of Section
2104 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 500 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 30 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	15	400			31
February	13	400			28
March	15	400			31
April	14	400			30
May	15	400			31
June	14	400			30
July	15	400			31
August	15	400			31
September	14	400			30
October	15	400			31
November	14	400			30
December	15	400			31
TOTAL	174		0		

Submitted Electronically