KOLAR Document ID: 1823185

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 # 31327
Name: Pauley, Gary dba Pauley Oil
Address 1: 314 5TH ST
Address 2:
City: CLAFLIN State: KS Zip: 67525 + 8901
Contact Person: Gary Pauley
Phone: (785) 2528024
Lease Name: DOBRINSKI A
Well Number: 2

API No.: 15-053-20868-00-00
Permit No: D23521.0
Reporting Year: 2024
(January 1 to December 31)

____ - SW - SW - SE Sec. 27 Twp. 17 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
390 feet from ☐ N / ☑ S Line of Section
2346 feet from ☑ E / ☐ W Line of Section
County: Ellsworth

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: 2500 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	4200				31
February	3800				28
March	4200				31
April	4100				30
May	4300				31
June	4200				30
July	4400				31
August	4400				31
September	4200				30
October	4300				31
November	4100				30
December	4400				31
TOTAL	50600		0		

Submitted Electronically