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 # 33977
Name: E K Energy LLC
Address 1: 12220 SW COLONY RD
Address 2: PO BOX 267
City: COLONY State: KS Zip: 66015 + 0267
Contact Person: DAVE KIMZEY
Phone: (620) 496-6257
Lease Name: MCINTYRE
Well Number: 42

API No.: 15-001-22650-00-01
Permit No: E19756.12
Reporting Year: 2024
(January 1 to December 31)

____ - NE - NW - SW Sec. 31 Twp. 23 S. R. 19 ☑ E ☐ W
(Q/Q/Q/Q)
2475 feet from ☐ N / ☑ S Line of Section
4150 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 550 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 100 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					0
February					0
March	150	500			31
April	150	500			30
May	150	500			31
June	150	500			30
July					0
August					0
September					0
October					0
November					0
December					0
TOTAL	600		0		

Submitted Electronically