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 # 6187
Name: Judson Enterprises, Inc.
Address 1: 427 Commercial Street
Address 2:
City: EMPORIA State: KS Zip: 66801 + 4012
Contact Person: Robert Symmonds
Phone: (620) 343-2764
Lease Name: SEELEY
Well Number: W 29

API No.: 15-073-19713-00-02
Permit No: E24935.2
Reporting Year: 2024
(January 1 to December 31)

____ - SE - SE - NW Sec. 5 Twp. 23 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
2660 feet from ☐ N / ☑ S Line of Section
2658 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: 800 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 1500 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					
February					
March	8679	280			7
April					
May					
June					
July	8310	260			7
August					
September					
October	8446	260			7
November					
December					
TOTAL	25435		0		

Submitted Electronically