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 # 34592
Name: Kansas Resource Exploration & Development, LLC
Address 1: 7201 WEST 129TH ST SUITE 110
Address 2:
City: OVERLAND PARK State: KS Zip: 66213 + 2628
Contact Person: Phillip Frick
Phone: (913) 871-3500
Lease Name: KNABE D
Well Number: KAI-1

API No.: 15-091-23360-00-00
Permit No: E18466.16
Reporting Year: 2024
(January 1 to December 31)

____ - SE - SW - NW Sec. 14 Twp. 14 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
3084 feet from ☐ N / ☑ S Line of Section
4469 feet from ☑ E / ☐ W Line of Section
County: Johnson

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: 300 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 32 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically