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 # 35220
Name: James P. Williams Enterprises, Inc.
Address 1: 802 MAIN STREET
Address 2: PO BOX 226
City: PALCO State: KS Zip: 67657 + 0226
Contact Person: James P. Williams
Phone: (479) 461-6553
Lease Name: LAMBERT
Well Number: 2

API No.: 15-163-23592-00-01
Permit No: D32653.0
Reporting Year: 2024
(January 1 to December 31)

NE - SW - NE - SE Sec. 5 Twp. 10 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
1890 feet from ☐ N / ☑ S Line of Section
920 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 8000 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	33000	0	0	0	31
February	31700	0	0	0	29
March	34100	0	0	0	31
April	33000	0	0	0	30
May	33950	0	0	0	31
June	33000	0	0	0	30
July	34100	0	0	0	31
August	34100	0	0	0	31
September	48000	0	0	0	30
October	49600	0	0	0	31
November	48000	0	0	0	30
December	49375	0	0	0	31
TOTAL	461925		0		

Submitted Electronically