

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 # 31519
Name: Jackson, Leland dba Lone Jack Oil Co.
Address 1: 3 S LAKEVIEW RD
Address 2: _____
City: MAPLETON State: KS Zip: 66754 + 9128
Contact Person: Leland Jackson
Phone: (620) 363-0492
Lease Name: FUHRMAN
Well Number: 11

API No.: 15-011-01208-00-01
Permit No: E26336.2
Reporting Year: 2025
(January 1 to December 31)
____ - SE - SW - SE Sec. 8 Twp. 24 S. R. 22 ☒ E ☐ W
(a/a/a/a)
13 feet from ☐ N / ☒ S Line of Section
1632 feet from ☒ E / ☐ W Line of Section
County: Bourbon

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: 450 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 60 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	<u>310</u>	<u>400</u>			<u>31</u>
	February	<u>280</u>	<u>400</u>			<u>28</u>
	March	<u>310</u>	<u>400</u>			<u>31</u>
	April	<u>300</u>	<u>400</u>			<u>30</u>
	May	<u>310</u>	<u>400</u>			<u>31</u>
	June	<u>300</u>	<u>400</u>			<u>30</u>
	July	<u>310</u>	<u>400</u>			<u>31</u>
	August	<u>310</u>	<u>400</u>			<u>31</u>
	September	<u>300</u>	<u>400</u>			<u>30</u>
	October	<u>310</u>	<u>400</u>			<u>31</u>
	November	<u>300</u>	<u>400</u>			<u>30</u>
	December	<u>310</u>	<u>400</u>			<u>31</u>
	TOTAL	<u>3650</u>		<u>0</u>		

Submitted Electronically