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: AUDREY COLLINS
Well Number: 35-W

API No.: 15-011-21927-00-00
Permit No: E14355.11
Reporting Year: 2025
(January 1 to December 31)

SE - NE - SW - NW Sec. 25 Twp. 24 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
3369 feet from ☐ N / ☑ S Line of Section
4214 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: 400 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 200 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					
April					
May					
June					
July					
August					
September					
October					
November	150	400			15
December	310	400			31
TOTAL	460		0		

Submitted Electronically