

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 # 31528
Name: Mike Kelso Oil, Inc.
Address 1: PO BOX 467
Address 2: _____
City: CHASE State: KS Zip: 67524 + 0467
Contact Person: Mike Kelso
Phone: (620) 938-2943
Lease Name: MISAK (BLITZBERG) SWD 3404
Well Number: 1-30

API No.: 15-191-22721-00-00
Permit No: D31842.0
Reporting Year: 2025
(January 1 to December 31)
SE - NE - NW - NE Sec. 30 Twp. 34 S. R. 4 ☐ E ☒ W
(a/a/a/a)
4930 feet from ☐ N / ☒ S Line of Section
1490 feet from ☒ E / ☐ W Line of Section
County: Sumner

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: 5000 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>4613</u>				<u>10</u>
	February	<u>0</u>				<u>0</u>
	March	<u>6922</u>				<u>12</u>
	April	<u>18174</u>				<u>30</u>
	May	<u>18448</u>				<u>31</u>
	June	<u>10158</u>				<u>30</u>
	July	<u>16285</u>				<u>31</u>
	August	<u>18005</u>				<u>31</u>
	September	<u>16841</u>				<u>30</u>
	October	<u>18294</u>				<u>31</u>
	November	<u>16382</u>				<u>30</u>
	December	<u>15764</u>				<u>31</u>
	TOTAL	<u>159886</u>		<u>0</u>		

Submitted Electronically