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 # 35127
Name: C & S Oil Company, LLC
Address 1: 325 S. ELM ST.
Address 2:
City: RUSSELL State: KS Zip: 67665 + 3005
Contact Person: Chris Pasek
Phone: (785) 483-0205
Lease Name: WOLF
Well Number: 1-A

API No.: 15-051-24607-00-00
Permit No: D25855.0
Reporting Year: 2025
(January 1 to December 31)

____ - SW - SE - SW Sec. 4 Twp. 13 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
322 feet from ☐ N / ☑ S Line of Section
3450 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 180 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	868	0			31
February	784	0			28
March	868	0			31
April	840	0			30
May	868	0			31
June	840	0			30
July	868	0			31
August	868	0			31
September	840	0			30
October	868	0			31
November	840	0			30
December	868	0			31
TOTAL	10220		0		

Submitted Electronically