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 # 33335
Name: IA Operating, Inc.
Address 1: 785 W. COVELL ROAD, SUITE 200
Address 2:
City: EDMOND State: OK Zip: 73003 + 2389
Contact Person: Jonathan Allen
Phone: ( 316 ) 721-0036
Lease Name: ELLA
Well Number: 26-2

API No.: 15-051-25158-00-01
Permit No: E30072.1
Reporting Year: 2025
*(January 1 to December 31)*

NE - SW - NW - SW Sec. 26 Twp. 11 S. R. 16 ☐ E ☑ W
*(Q/Q/Q/Q)*
1892 feet from ☐ N / ☑ S Line of Section
4669 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: 800 psi Injection Zone: TOPEKA,LANSING,LANSING-KANSAS CITY,MARMATON
Maximum Authorized Injection Rate: 500 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 | 4663 | 0 | 0 | 0 | 31 |
| February | 3177 | 0 | 0 | 0 | 28 |
| March | 4512 | 0 | 0 | 0 | 31 |
| April | 4791 | 0 | 0 | 0 | 30 |
| May | 5073 | 0 | 0 | 0 | 31 |
| June | 4672 | 0 | 0 | 0 | 30 |
| July | 6086 | 0 | 0 | 0 | 30 |
| August | 5724 | 0 | 0 | 0 | 31 |
| September | 5181 | 0 | 0 | 0 | 30 |
| October | 5796 | 0 | 0 | 0 | 31 |
| November | 5376 | 0 | 0 | 0 | 30 |
| December | 5487 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 60538 | | 0 | | |

Submitted Electronically