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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 # 9501
Name: Faith Petroleum, Inc.
Address 1: PO BOX 1182
Address 2:
City: ARKANSAS CITY State: KS Zip: 67005 + 1182
Contact Person: David Warren
Phone: (620) 441-7496
Lease Name: J WARREN
Well Number: 1

API No.: 15-035-02001-00-00
Permit No: D05484.0
Reporting Year: 2025
(January 1 to December 31)

NE - SE - SW - NW (Q/Q/Q/Q) Sec. 15 Twp. 35 S. R. 5 ☑ E ☐ W
3086 feet from ☐ N / ☑ S Line of Section
4262 feet from ☑ E / ☐ W Line of Section
County: Cowley

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: 75 psi Injection Zone: STALNAKER
Maximum Authorized Injection Rate: 550 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	3550	0	0		31
February	3500	0	0		28
March	3450	0	0		31
April	3500	0	0		30
May	3550	0	0		31
June	3600	0	0		30
July	3700	0	0		31
August	3650	0	0		31
September	3600	0	0		30
October	3500	0	0		31
November	3450	0	0		30
December	3550	0	0		31
TOTAL	42600		0		

Submitted Electronically