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 # 31173
Name: Massey, Gary R.
Address 1: 1085 180TH ST
Address 2:
City: EUREKA State: KS Zip: 67045 + 4227
Contact Person: Victoria Scott
Phone: (620) 583-4201
Lease Name: LADD B
Well Number: 4

API No.: 15-073-30113-00-02
Permit No: E20795.1
Reporting Year: 2025
(January 1 to December 31)

____ - NE - NW - SE Sec. 25 Twp. 25 S. R. 8 ☑ E ☐ W
(Q/Q/Q/Q)
2376 feet from ☐ N / ☑ S Line of Section
1788 feet from ☑ E / ☐ W Line of Section
County: Greenwood

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Bartlesville
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	750	100	0	0	31
February	650	100	0	0	28
March	775	100	0	0	31
April	750	100	0	0	30
May	775	100	0	0	31
June	750	100	0	0	30
July	775	100	0	0	31
August	775	100	0	0	31
September	750	100	0	0	30
October	775	100	0	0	31
November	750	100	0	0	30
December	750	100	0	0	31
TOTAL	9025		0		

Submitted Electronically