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 # 6044
Name: Stelbar Oil Corporation, Inc.
Address 1: 1625 N WATERFRONT PKWY STE 200
Address 2:
City: WICHITA State: KS Zip: 67206 + 6602
Contact Person: Tyson Dilka
Phone: (316) 264-8378
Lease Name: DEARDEN
Well Number: 7B-16-1931

API No.: 15-171-20675-00-04
Permit No: E34178.1
Reporting Year: 2025
(January 1 to December 31)

____ - NW - SW - NE Sec. 16 Twp. 19 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
1650 feet from ☑ N / ☐ S Line of Section
2310 feet from ☑ E / ☐ W Line of Section
County: Scott

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: 1000 psi Injection Zone: MARMATON
Maximum Authorized Injection Rate: 750 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	18863	0	0	0	31
February	17627	0	0	0	28
March	19573	0	0	0	31
April	20060	0	0	0	30
May	20992	0	0	0	31
June	20810	0	0	0	30
July	22254	0	0	0	31
August	21984	0	0	0	31
September	21314	0	0	0	30
October	21191	0	0	0	31
November	20089	0	0	0	30
December	21519	0	0	0	31
TOTAL	246276		0		

Submitted Electronically