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 # 35243
Name: Infinity Oil, Inc.
Address 1: PO BOX 45
Address 2:
City: HAYS State: KS Zip: 67601 + 0045
Contact Person: Drue Herl
Phone: (785) 628-6078
Lease Name: WOLF
Well Number: 1 SWD

API No.: 15-051-21510-00-01
Permit No: E28975.1
Reporting Year: 2025
(January 1 to December 31)

E2 - SE - NE - NW Sec. 17 Twp. 15 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
4290 feet from ☐ N / ☑ S Line of Section
2820 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: 750 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 1000 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	9300	0	0	0	31
February	840	0	0	0	28
March	9300	0	0	0	31
April	9000	0	0	0	30
May	9300	0	0	0	31
June	9000	0	0	0	30
July	9300	0	0	0	31
August	9300	0	0	0	31
September	9000	0	0	0	30
October	9300	0	0	0	31
November	9000	0	0	0	30
December	9300	0	0	0	31
TOTAL	101940		0		

Submitted Electronically