

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 # 34997
Name: Casillas Petroleum Corp
Address 1: 348 ROAD DD
Address 2: _____
City: SATANTA State: KS Zip: 67870 + 8775
Contact Person: Melissa Imler
Phone: (620) 276-3693
Lease Name: PPU SWD (JONES)
Well Number: 1

API No.: 15-055-10067-00-02
Permit No: D07866.0
Reporting Year: 2025
(January 1 to December 31)
NW - NE - SW - SW Sec. 29 Twp. 26 S. R. 34 ☐ E ☒ W
(a/a/a/a)
1280 feet from ☐ N / ☒ S Line of Section
4430 feet from ☒ E / ☐ W Line of Section
County: Finney

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: 250 psi Injection Zone: GLORIETTA
Maximum Authorized Injection Rate: 6000 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	<u>31789</u>	<u>120</u>			<u>31</u>
	February	<u>35900</u>	<u>132</u>			<u>28</u>
	March	<u>25019</u>	<u>117</u>			<u>31</u>
	April	<u>22979</u>	<u>112</u>			<u>30</u>
	May	<u>11636</u>	<u>124</u>			<u>31</u>
	June	<u>21968</u>	<u>120</u>			<u>30</u>
	July	<u>26018</u>	<u>120</u>			<u>31</u>
	August	<u>29194</u>	<u>132</u>			<u>31</u>
	September	<u>19103</u>	<u>119</u>			<u>30</u>
	October	<u>16970</u>	<u>114</u>			<u>31</u>
	November	<u>15539</u>	<u>110</u>			<u>30</u>
	December	<u>9834</u>	<u>87</u>			<u>31</u>
	TOTAL	<u>265949</u>		<u>0</u>		

Submitted Electronically