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 # 31385
Name: M G Oil Inc
Address 1: PO BOX 162
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0162
Contact Person: Curt Counts
Phone: (785) 483-1627
Lease Name: LAWRENCE
Well Number: 15 SWD

API No.: 15-101-22681-00-00
Permit No: D34299.0
Reporting Year: 2025
(January 1 to December 31)

SE - NW - SE - NW Sec. 15 Twp. 16 S. R. 28 ☐ E ☑ W
(Q/Q/Q/Q)
3395 feet from ☐ N / ☑ S Line of Section
3330 feet from ☑ E / ☐ W Line of Section
County: Lane

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	5270	0	0	0	31
February	4760	0	0	0	28
March	5270	0	0	0	31
April	5100	0	0	0	30
May	5270	0	0	0	31
June	5100	0	0	0	30
July	5270	0	0	0	31
August	5270	0	0	0	31
September	5100	0	0	0	30
October	5270	0	0	0	31
November	5100	0	0	0	30
December	5270	0	0	0	31
TOTAL	62050		0		

Submitted Electronically