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 # 4226
Name: Galemore, Matt dba Galemore Oil Co.
Address 1: 305 E. RUTLEDGE ST
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 1431
Contact Person: matt galemore
Phone: (620) 625-3220
Lease Name: SHARP
Well Number: 1

API No.: 15-205-21248-00-01
Permit No: E12901.18
Reporting Year: 2025
(January 1 to December 31)

____ - NE - NW - SW Sec. 24 Twp. 27 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
2181 feet from ☐ N / ☑ S Line of Section
4098 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 600 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 50 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	10	200			30
February	5	200			28
March	10	200			30
April	5	200			30
May	5	200			30
June	5	200			30
July	10	200			30
August	5	200			30
September	5	200			30
October	5	200			30
November	5	200			30
December	5	200			30
TOTAL	75		0		

Submitted Electronically