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 # 5876
Name: Diamond B Miami Flood, Ltd.
Address 1: 34475 W 263RD ST
Address 2:
City: PAOLA State: KS Zip: 66071 + 4224
Contact Person: Victoria Scott
Phone: ( 913 ) 294-3841
Lease Name: BEATTY
Well Number: I 2

API No.: 15-121-25922-00-00
Permit No: E19094.3
Reporting Year: 2025
*(January 1 to December 31)*

____ - NE - SW - NE Sec. 23 Twp. 16 S. R. 21 ☑ E ☐ W
*(Q/Q/Q/Q)*
3585 feet from ☐ N / ☑ S Line of Section
1866 feet from ☑ E / ☐ W Line of Section
County: Miami

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: NA mg/l Specific Gravity: NA Additives: Bacteriacides, Corrosion Inhibitor
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 650 psi Injection Zone: Squirrel
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 | 465 | 430 | 0 | 0 | 31 |
| February | 420 | 430 | 0 | 0 | 28 |
| March | 465 | 430 | 0 | 0 | 31 |
| April | 450 | 430 | 0 | 0 | 30 |
| May | 465 | 430 | 0 | 0 | 31 |
| June | 450 | 430 | 0 | 0 | 30 |
| July | 465 | 430 | 0 | 0 | 31 |
| August | 465 | 430 | 0 | 0 | 31 |
| September | 450 | 430 | 0 | 0 | 30 |
| October | 465 | 430 | 0 | 0 | 31 |
| November | 450 | 430 | 0 | 0 | 30 |
| December | 465 | 430 | 0 | 0 | 31 |
| ***TOTAL*** | 5475 | | 0 | | |

Submitted Electronically