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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 # 34434
Name: Edison Operating Company LLC
Address 1: 9342 E CENTRAL AVE STE A
Address 2:
City: WICHITA State: KS Zip: 67206 + 2573
Contact Person: David Withrow
Phone: (316) 201-1744
Lease Name: PETE 31-34-16
Well Number: 1 SWD

API No.: 15-033-21602-00-00
Permit No: D30956.0
Reporting Year: 2025
(January 1 to December 31)

NW - NW - NW - NE Sec. 31 Twp. 34 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
185 feet from ☑ N / ☐ S Line of Section
2440 feet from ☑ E / ☐ W Line of Section
County: Comanche

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: ARBUCKLE
Maximum Authorized Injection Rate: 8000 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	8112	0	0	0	31
February	8112	0	0	0	28
March	8112	0	0	0	31
April	8112	0	0	0	30
May	8112	0	0	0	31
June	8112	0	0	0	30
July	8112	0	0	0	31
August	8112	0	0	0	31
September	8112	0	0	0	30
October	8112	0	0	0	31
November	8112	0	0	0	30
December	8112	0	0	0	31
TOTAL	97344		0		

Submitted Electronically