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 # 33556
Name: Drake Exploration, LLC
Address 1: 15894 294TH CIR #19
Address 2:
City: ARKANSAS CITY State: KS Zip: 67005 + 6126
Contact Person: Darren Broyles
Phone: (620) 441-7223
Lease Name: WILLIAMSON
Well Number: 1

API No.: 15-191-00090-00-01
Permit No: D08514.0
Reporting Year: 2025
(January 1 to December 31)

____ - ____ - ____ - SW Sec. 13 Twp. 34 S. R. 1 ☑ E ☐ W
(Q/Q/Q/Q)
661 feet from ☐ N / ☑ S Line of Section
4944 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	1395				31
February	1260				28
March	1395				31
April	1350				30
May	1395				31
June	1350				30
July	1395				31
August	1395				31
September	1350				30
October	1395				31
November	1350				30
December	1395				31
TOTAL	16425		0		

Submitted Electronically