KOLAR Document ID: 1812012

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 # 33527
Name: J D Dreiling Oil, Inc.
Address 1: 215 6TH ST
Address 2:
City: CLAFLIN State: KS Zip: 67525 + 8903
Contact Person: Jane Dreiling
Phone: (620) 587-3658
Lease Name: HALSTEAD SWD SYSTEM (SCHROEDER)
Well Number: 1 (6)

API No.: 15-079-20067-00-01
Permit No: D14483.0
Reporting Year: 2025
(January 1 to December 31)

____ - NE - SE - SE Sec. 3 Twp. 23 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
990 feet from ☐ N / ☑ S Line of Section
330 feet from ☑ E / ☐ W Line of Section
County: Harvey

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: 5000 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	1920		0		31
February	12180		0		28
March	9920		0		31
April	9600		0		30
May	8960		0		31
June	9280		0		30
July	7360		0		31
August	12180		0		31
September	8000		0		30
October	11780		0		31
November	9920		0		30
December	9920		0		31
TOTAL	111020		0		

Submitted Electronically