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 # 35117
Name: Poverty Knob Production, LLC
Address 1: 39395 W 351ST ST.
Address 2:
City: OSAWATOMIE State: KS Zip: 66064 + 4214
Contact Person: RANDY OR MISTY KITCHEN
Phone: (913) 731-8367
Lease Name: O'BRIEN
Well Number: AI-32

API No.: 15-121-31253-00-00
Permit No: E26555.10
Reporting Year: 2025
(January 1 to December 31)

SW - SW - NE - SE Sec. 1 Twp. 18 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
1630 feet from ☐ N / ☑ S Line of Section
1000 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: _____ mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 380 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 61 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	355	380			31
February	300	380			28
March	345	380			31
April	260	380			30
May	205	380			31
June	410	380			30
July	440	380			31
August	500	380			31
September	470	380			30
October	235	380			31
November	365	380			30
December	400	380			31
TOTAL	4285		0		

Submitted Electronically