

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 # 6627
Name: Prospect Oil & Gas Corp
Address 1: PO BOX 837
Address 2: _____
City: RUSSELL State: KS Zip: 67665 + 0837
Contact Person: BRAD HUTCHISON
Phone: (785) 483-1522
Lease Name: O'LEARY
Well Number: 3

API No.: 15-163-19393-00-00
Permit No: D16607.0
Reporting Year: 2025
(January 1 to December 31)
W2 - NE - SE - SE Sec. 34 Twp. 10 S. R. 16 ☐ E ☒ W
(a/a/a/a)
943 feet from ☐ N / ☒ S Line of Section
537 feet from ☒ E / ☐ W Line of Section
County: Rooks

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: 400 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 1000 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	<u>10805</u>				<u>31</u>
	February	<u>10750</u>				<u>28</u>
	March	<u>10825</u>				<u>31</u>
	April	<u>10755</u>				<u>30</u>
	May	<u>10905</u>				<u>31</u>
	June	<u>10805</u>				<u>30</u>
	July	<u>10905</u>				<u>31</u>
	August	<u>10900</u>				<u>31</u>
	September	<u>10725</u>				<u>30</u>
	October	<u>10925</u>				<u>31</u>
	November	<u>10805</u>				<u>30</u>
	December	<u>10700</u>				<u>31</u>
	TOTAL	<u>129805</u>		<u>0</u>		

Submitted Electronically