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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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: ( 918 ) 492-9797
Lease Name: PRUSA, JOE
Well Number: 2

API No.: 15-009-03063-00-03
Permit No: E26574.2
Reporting Year: 2025
*(January 1 to December 31)*

____ - NE - NE - NE Sec. 20 Twp. 16 S. R. 11 ☐ E ☑ W
*(Q/Q/Q/Q)*
4985 feet from ☐ N / ☑ S Line of Section
436 feet from ☑ E / ☐ W Line of Section
County: Barton

**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: 800 psi Injection Zone: Lansing-Kansas City
Maximum Authorized Injection Rate: 800 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 10 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 9300 | 100 | 0 | 0 | 31 |
| February | 6600 | 100 | 0 | 0 | 22 |
| March | 9300 | 100 | 0 | 0 | 31 |
| April | 9000 | 100 | 0 | 0 | 30 |
| May | 9300 | 100 | 0 | 0 | 31 |
| June | 9000 | 100 | 0 | 0 | 30 |
| July | 9300 | 100 | 0 | 0 | 31 |
| August | 9300 | 100 | 0 | 0 | 31 |
| September | 9000 | 100 | 0 | 0 | 30 |
| October | 9300 | 100 | 0 | 0 | 31 |
| November | 9000 | 100 | 0 | 0 | 30 |
| December | 9300 | 100 | 0 | 0 | 31 |
| ***TOTAL*** | 107700 | | 0 | | |

Submitted Electronically