

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 # 34337
Name: Ballou, Christopher dba Ballou Energy
Address 1: 29933 W 303RD ST
Address 2: _____
City: PAOLA State: KS Zip: 66071 + 4601
Contact Person: Jeri Ballou
Phone: (913) 731-5935
Lease Name: HARRA
Well Number: EW 4

API No.: 15-121-26847-00-01
Permit No: E29076.1
Reporting Year: 2025
(January 1 to December 31)
____ - SE - SW - NW Sec. 13 Twp. 17 S. R. 22 ☒ E ☐ W
(a/a/a/a)
2963 feet from ☐ N / ☒ S Line of Section
4456 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: 340 psi Injection Zone: PERU
Maximum Authorized Injection Rate: 60 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 (Include TA's)

III.	Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
	January	<u>0</u>	<u>0</u>			<u>0</u>
	February	<u>0</u>	<u>0</u>			<u>0</u>
	March	<u>0</u>	<u>0</u>			<u>0</u>
	April	<u>0</u>	<u>0</u>			<u>0</u>
	May	<u>0</u>	<u>0</u>			<u>0</u>
	June	<u>0</u>	<u>0</u>			<u>0</u>
	July	<u>0</u>	<u>0</u>			<u>0</u>
	August	<u>60</u>	<u>100</u>			<u>1</u>
	September	<u>0</u>	<u>0</u>			<u>0</u>
	October	<u>0</u>	<u>0</u>			<u>0</u>
	November	<u>0</u>	<u>0</u>			<u>0</u>
	December	<u>0</u>	<u>0</u>			<u>0</u>
	TOTAL	<u>60</u>		<u>0</u>		

Submitted Electronically