

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 # 35069

Name: Kansas City Oil, LLC

Address 1: P.O. BOX 14292

Address 2: _____

City: PARKVILLE State: MO Zip: 64152 + 7292

Contact Person: JAMES FISHER

Phone: (785) 766-0288

Lease Name: KU

Well Number: 19

API No.: 15-121-30454-00-00

Permit No.: E32011.6

Reporting Year: 2025
(January 1 to December 31)

 - NW - SW - SW Sec. 23 Twp. 18 S. R. 22 ☒ E ☐ W
(a/a/a/a)

985 feet from ☐ N / ☒ S Line of Section

5000 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: 330 psi Injection Zone: PERU

Maximum Authorized Injection Rate: 100 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>599</u>	<u>250</u>			<u>31</u>
	February	<u>701</u>	<u>250</u>			<u>28</u>
	March	<u>966</u>	<u>250</u>			<u>31</u>
	April	<u>1011</u>	<u>250</u>			<u>30</u>
	May	<u>865</u>	<u>250</u>			<u>31</u>
	June	<u>600</u>	<u>250</u>			<u>30</u>
	July	<u>510</u>	<u>250</u>			<u>31</u>
	August	<u>355</u>	<u>250</u>			<u>31</u>
	September	<u>575</u>	<u>250</u>			<u>30</u>
	October	<u>128</u>	<u>250</u>			<u>31</u>
	November	<u>474</u>	<u>250</u>			<u>30</u>
	December	<u>58</u>	<u>250</u>			<u>31</u>
	TOTAL	<u>6842</u>		<u>0</u>		

Submitted Electronically