KOLAR Document ID: 1895997

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 # 5184
Name: Shields Oil Producers Inc.
Address 1: 326 N MAIN
Address 2:
City: RUSSELL State: KS Zip: 67665 + 2731
Contact Person: SCOTT MCCOBB
Phone: (785) 3240663
Lease Name: MORGENSTERN
Well Number: 4

API No.: 15-167-21405-00-01
Permit No: E16992.2
Reporting Year: 2025
(January 1 to December 31)

(Q/Q/Q/Q) - E2 - SE - SE Sec. 23 Twp. 15 S. R. 15 ☐ E ☑ W
667 feet from ☐ N / ☑ S Line of Section
446 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 750 psi Injection Zone: KANSAS CITY
Maximum Authorized Injection Rate: 200 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	4127				31
February	3737				29
March	4216				31
April	4061				30
May	4166				31
June	4187				30
July	4314				31
August	4111				31
September	4058				30
October	4193				31
November	4201				30
December	4134				31
TOTAL	49505		0		

Submitted Electronically