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 # 5386
Name: Production Drilling, Inc.
Address 1: 1023 RESERVATION RD
Address 2:
City: HAYS State: KS Zip: 67601 + 3982
Contact Person: NIck Gabel
Phone: (785) 625-1189
Lease Name: MATILDA ALBERT
Well Number: 3

API No.: 15-051-22941-00-01
Permit No: D24102.0
Reporting Year: 2025
(January 1 to December 31)

____ - ____ - SE - NE Sec. 30 Twp. 11 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
3065 feet from ☐ N / ☑ S Line of Section
579 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	9641				31
February	8708				28
March	9641				31
April	9330				30
May	9641				31
June	9330				30
July	9641				31
August	9641				31
September	9330				30
October	9641				31
November	9630				30
December	9641				31
TOTAL	113815		0		

Submitted Electronically