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 # 36006
Name: Superior Oilfield Services LLC
Address 1: 19 E WEA STREET #304
Address 2:
City: PAOLA State: KS Zip: 66071 + 3515
Contact Person: Phillip Frick
Phone: (913) 594-2703
Lease Name: BARKIS
Well Number: AI-11

API No.: 15-121-30993-00-00
Permit No: E31866.13
Reporting Year: 2025
(January 1 to December 31)

NW - SW - NW - NW Sec. 17 Twp. 16 S. R. 24 ☑ E ☐ W
(Q/Q/Q/Q)
4455 feet from ☐ N / ☑ S Line of Section
5115 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: 500 psi Injection Zone: Squirrel
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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	1029	450	0	0	31
August	1025	450	0	0	31
September	937	450	0	0	30
October	885	450	0	0	31
November	932	450	0	0	30
December	984	450	0	0	31
TOTAL	5792		0		

Submitted Electronically