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 # 30925
Name: Yocham, Darrell dba Yocham Oil Company
Address 1: 870 W VIRGINIA RD
Address 2:
City: COLONY State: Kansas Zip: 66015 + 7257
Contact Person: Darrell Yocham
Phone: (620) 365-1775
Lease Name: MURRAY
Well Number: W-1

API No.: 15-031-20725-00-00
Permit No: D19518.0
Reporting Year: 2025
(January 1 to December 31)

____ - SW - SW - NW Sec. 13 Twp. 23 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
2728 feet from ☐ N / ☑ S Line of Section
5192 feet from ☑ E / ☐ W Line of Section
County: Coffey

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: 175 psi Injection Zone: IOLA
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	310	70			31
February	280	70			28
March	310	70			31
April	300	70			30
May	310	70			31
June	300	70			30
July	310	70			31
August	310	70			31
September	300	70			30
October	310	70			31
November	300	70			30
December	310	70			31
TOTAL	3650		0		

Submitted Electronically