

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 # _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____
Lease Name: _____
Well Number: _____

API No.: _____
Permit No.: _____
Reporting Year: _____
(January 1 to December 31)
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
County: _____

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: _____ psi Injection Zone: _____
Maximum Authorized Injection Rate: _____ 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 | _____ | _____ | _____ | _____ | _____ |
| | February | _____ | _____ | _____ | _____ | _____ |
| | March | _____ | _____ | _____ | _____ | _____ |
| | April | _____ | _____ | _____ | _____ | _____ |
| | May | _____ | _____ | _____ | _____ | _____ |
| | June | _____ | _____ | _____ | _____ | _____ |
| | July | _____ | _____ | _____ | _____ | _____ |
| | August | _____ | _____ | _____ | _____ | _____ |
| | September | _____ | _____ | _____ | _____ | _____ |
| | October | _____ | _____ | _____ | _____ | _____ |
| | November | _____ | _____ | _____ | _____ | _____ |
| | December | _____ | _____ | _____ | _____ | _____ |
| | TOTAL | _____ | _____ | _____ | _____ | _____ |



Complete Water Analysis

Customer: **SHAKESPEARE OIL COMPANY**
 Formation Zone:
 Geographic Region: **Kansas**
 Geographic Location: **Lane County**
 System Description: **Production System**

Equipment Description: **Marit 2-24 SWD**
 Sample Point: **Bleeder**
 Customer ID:
 Latitude/Longitude: **0.00, 0.00**
 Account Rep: **michael.walters@championx.com**

Collect Date: **02/03/2026**
 Submit Date: **02/09/2026**
 Report Date: **02/11/2026**
 Sample ID: **BC90166**
 Location Code: **430656**

| Field Analysis | | | Sample Analysis | | |
|---|----------|-----------------|------------------------|-------------|-----------------|
| Analysis | Result | Analysis Method | Analysis | Result | Analysis Method |
| Total Alkalinity (M-Alk as HCO ₃) | 127 mg/L | Titration | Specific Gravity | 1.034 | Densitometer |
| Dissolved CO ₂ | 200 mg/L | Titration | Ionic Strength | 0.890 mol/L | Calculation |
| Dissolved H ₂ S | 90 mg/L | Titration | Total Dissolved Solids | 48400 mg/L | Calculation |
| Pressure Surface | 25 psi | | | | |
| Temperature | 100 ° F | | | | |
| pH of Water | 6.8 | Meter | | | |

| Cations - Analyzed By ICP | | | | | |
|---------------------------|-------------|-----------------|------------|--|--|
| Iron | <0.500 mg/L | Measured Sodium | 16800 mg/L | | |
| Manganese | <0.200 mg/L | | | | |
| Barium | <0.100 mg/L | | | | |
| Strontium | 30.3 mg/L | | | | |
| Calcium | 908 mg/L | | | | |
| Magnesium | 364 mg/L | | | | |
| Sodium | 16800 mg/L | | | | |

| Anions - Analyzed By IC* | | | | | |
|--------------------------|------------|---------|-----------|--|--|
| Chloride | 26500 mg/L | Sulfate | 3700 mg/L | | |

| Scale Type | | | | | |
|-----------------------------------|--|------|--|----------------------------------|-------|
| Anhydrite CaSO ₄ PTB | | N/A | | Anhydrite CaSO ₄ SI | -0.53 |
| Barite BaSO ₄ PTB | | N/A | | Barite BaSO ₄ SI | N/A |
| Calcite CaCO ₃ PTB | | N/A | | Calcite CaCO ₃ SI | -0.83 |
| Celestite SrSO ₄ PTB | | 2.20 | | Celestite SrSO ₄ SI | 0.050 |
| Gypsum CaSO ₄ PTB | | N/A | | Gypsum CaSO ₄ SI | -0.39 |
| Hemihydrate CaSO ₄ PTB | | N/A | | Hemihydrate CaSO ₄ SI | -0.37 |

Comments

Scaling predictions calculated using Oddo-Tomson model

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