KOLAR Document ID: 1927329

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 # 32062
Name: ARDC INC.
Address 1: 108 W 34TH ST
Address 2:
City: HAYS State: KS Zip: 67601 + 1629
Contact Person: Greg Whitehair
Phone: (785) 625-6588
Lease Name: TEICHMAN
Well Number: 1

API No.: 15-185-10116-00-01
Permit No: D22130.0
Reporting Year: 2025
(January 1 to December 31)

(Q/Q/Q/Q) NW - NW - SE Sec. 12 Twp. 22 S. R. 13 ☐ E ☑ W
2294 feet from ☐ N / ☑ S Line of Section
2303 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: ARBUCKLE
Maximum Authorized Injection Rate: 10000 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	36000				31
February	38500				28
March	37500				31
April	35000				30
May	36000				31
June	35000				30
July	36000				31
August	36500				31
September	37000				30
October	36500				31
November	36000				28
December	37500				31
TOTAL	437500		0		

Submitted Electronically