

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 # 33085
Name: Nichols LLC
Address 1: 423 East Main
Address 2: BOX 8
City: FORGAN State: OK Zip: 73938 + 0008
Contact Person: Sandy Elliott
Phone: (580) 487-3454
Lease Name: ENGEL
Well Number: 3-32

API No.: 15-175-21026-00-02
Permit No.: D28398.0
Reporting Year: 2025
(January 1 to December 31)
____ - ____ - NE - NE Sec. 32 Twp. 34 S. R. 34 ☐ E ☒ W
(a/a/a/a)
4580 feet from ☐ N / ☒ S Line of Section
680 feet from ☒ E / ☐ W Line of Section
County: Seward

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: 1000 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 2500 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	<u>3425</u>				<u>31</u>
	February	<u>4709</u>				<u>29</u>
	March	<u>3560</u>				<u>31</u>
	April	<u>4826</u>				<u>30</u>
	May	<u>4043</u>				<u>31</u>
	June	<u>3519</u>				<u>30</u>
	July	<u>3233</u>				<u>31</u>
	August	<u>3245</u>				<u>31</u>
	September	<u>3880</u>				<u>30</u>
	October	<u>3956</u>				<u>31</u>
	November	<u>3000</u>				<u>30</u>
	December	<u>3698</u>				<u>31</u>
	TOTAL	<u>45094</u>		<u>0</u>		

Submitted Electronically