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 # 33335
Name: IA Operating, Inc.
Address 1: 785 W. COVELL ROAD, SUITE 200
Address 2:
City: EDMOND State: OK Zip: 73003 + 2389
Contact Person: Jonathan Allen
Phone: (316) 721-0036
Lease Name: MARY
Well Number: 29-1

API No.: 15-051-25281-00-01
Permit No: E30416.1
Reporting Year: 2020
(January 1 to December 31)

NE - NW - SE - SW Sec. 29 Twp. 12 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
1200 feet from ☐ N / ☑ S Line of Section
3560 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 800 psi Injection Zone: LANSING-KANSAS CITY,TOPEKA
Maximum Authorized Injection Rate: 500 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	554	0			31
February	521	0			29
March	554	0			31
April	61	0			21
May	0	0			0
June	406	0			29
July	539	0			31
August	578	0			31
September	565	0			30
October	581	0			31
November	576	0			30
December	586	0			31
TOTAL	5521		0		

Submitted Electronically