1287351

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 # 3449
Name: Coen Energy Corporation
Address 1: 11217 W 140TH PL
Address 2:
City: OVERLAND PARK State: KS Zip: 66221 + 8019
Contact Person: David Coen
Phone: (913) 239-0495
Lease Name: MURROW
Well Number: 6-W

API No.: 15-107-23440-00-00
Permit No: E25819.10
Reporting Year: 2015
(January 1 to December 31)

____ - NW - SW - SE Sec. 16 Twp. 23 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
2980 feet from ☐ N / ☑ S Line of Section
4480 feet from ☑ E / ☐ W Line of Section
County: Linn

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 20000mg/l mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 550 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 19 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	150	200	0		31
February	100	200	0		28
March	200	200	0		31
April	100	200	0		30
May	200	200	0		31
June	100	200	0		30
July	100	200	0		31
August	200	200	0		31
September	100	200	0		30
October	200	200	0		31
November	150	200	0		30
December	200	200	0		31
TOTAL	1800		0		

Submitted Electronically