1290560

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 # 34350
Name: Altavista Energy, Inc.
Address 1: 4595 K-33 HIGHWAY
Address 2: PO BOX 128
City: WELLSVILLE State: KS Zip: 66092 + __ __ __ __
Contact Person: Phillip Frick
Phone: (785) 883-4057
Lease Name: Brown
Well Number: AI-10

API No.: 15-059-25747-00-00
Permit No: E31038.8
Reporting Year: 2015
(January 1 to December 31)

NW - NE - NE - SW Sec. 19 Twp. 16 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4680 feet from ☐ N / ☑ S Line of Section
3090 feet from ☑ E / ☐ W Line of Section
County: Franklin

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: 500 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 10 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	546	490	0		31
February	588	490	0		28
March	634	490	0		31
April	644	490	0		30
May	558	490	0		31
June	492	490	0		30
July	506	490	0		31
August	616	490	0		31
September	603	490	0		30
October	542	490	0		31
November	572	490	0		30
December	639	490	0		31
TOTAL	6940		0		

Submitted Electronically