1290642

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 # 33360
Name: C & H Energy LLC
Address 1: PO BOX 71
Address 2:
City: BLUE MOUND State: KS Zip: 66010 + __ __ __ __
Contact Person: Shannon Harison
Phone: (620) 363-2895
Lease Name: KAYCEE
Well Number: 4

API No.: 15-011-22284-00-01
Permit No: E26986.2
Reporting Year: 2015
(January 1 to December 31)

NE - SW - NW - SW Sec. 4 Twp. 24 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1785 feet from ☐ N / ☑ S Line of Section
4815 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 600 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 50 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	7	600	0		14
February	7	600	0		14
March	7	600	0		14
April	7	600	0		14
May	6	600	0		12
June	6	600	0		12
July	6	600	0		12
August	6	600	0		12
September	6	600	0		12
October	6	600	0		12
November	6	600	0		12
December	6	600	0		12
TOTAL	76		0		

Submitted Electronically