1294193

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 # 34648
Name: A & L Energy Operations LLC
Address 1: 575 MADISON AVENUE 22ND FL
Address 2:
City: NEW YORK State: NY Zip: 10022 + __ __ __ __
Contact Person: Gil Nevat
Phone: ( 212 ) 586-6665
Lease Name: THOREN
Well Number: 61

API No.: 15-045-21357-00-00
Permit No: E28076.14
Reporting Year: 2015
*(January 1 to December 31)*

NE - NE - NE - SW Sec. 6 Twp. 14 S. R. 21 ☑ E ☐ W
*(Q/Q/Q/Q)*
4850 feet from ☐ N / ☑ S Line of Section
471 feet from ☑ E / ☐ W Line of Section
County: Douglas

**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: 40 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 | 1240 | 500 | 0 | | 31 |
| February | 1120 | 500 | 0 | | 28 |
| March | 1240 | 500 | 0 | | 31 |
| April | 1200 | 500 | 0 | | 30 |
| May | 1240 | 500 | 0 | | 31 |
| June | 1200 | 500 | 0 | | 30 |
| July | 1240 | 500 | 0 | | 31 |
| August | 1240 | 500 | 0 | | 31 |
| September | 1200 | 500 | 0 | | 30 |
| October | 1240 | 500 | 0 | | 31 |
| November | 1200 | 500 | 0 | | 30 |
| December | 1240 | 500 | 0 | | 31 |
| ***TOTAL*** | 14600 | | 0 | | |

Submitted Electronically