1331526

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 # 5364
Name: Beren Corporation
Address 1: 2020 N. BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + __ __ __ __
Contact Person: Emma Richmond
Phone: (316) 265-3311
Lease Name: ELAINE
Well Number: 3

API No.: 15-109-20423-00-02
Permit No: E25511.1
Reporting Year: 2016
(January 1 to December 31)

____ - NE - SW - NW Sec. 3 Twp. 12 S. R. 34 ☐ E ☑ W
(Q/Q/Q/Q)
3323 feet from ☐ N / ☑ S Line of Section
2070 feet from ☑ E / ☐ W Line of Section
County: Logan

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1000 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 700 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	3575	0	0		31
February	4162	0	0		29
March	4467	0	0		31
April	3766	0	0		30
May	4429	0	0		31
June	5463	0	0		30
July	5953	0	0		31
August	6330	0	0		31
September	6235	0	0		30
October	5338	0	0		28
November	5807	0	0		29
December	4076	0	0		21
TOTAL	59601		0		

Submitted Electronically