1339891

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 # 5610
Name: Bruce Oil Company, L.L.C.
Address 1: 1704 LIMESTONE RD
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 6500
Contact Person: Lonny Bruce
Phone: (620) 241-2938
Lease Name: EVANS
Well Number: 8

API No.: 15-115-21250-00-00
Permit No: D25295.0
Reporting Year: 2016
(January 1 to December 31)

____ - SE - SE - SW Sec. 33 Twp. 22 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
365 feet from ☐ N / ☑ S Line of Section
1164 feet from ☑ E / ☐ W Line of Section
County: Marion

I. Injection Fluid:

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

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 3500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

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

Submitted Electronically