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 # 34387
Name: C5 Energy LLC
Address 1: PO BOX 725
Address 2:
City: COLLINSVILLE State: OK Zip: 74021 + __ __ __ __
Contact Person: Stan Miller II
Phone: (918) 798-4506
Lease Name: STENGER
Well Number: 1

API No.: 15-137-20049-00-02
Permit No: E21177.2
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - NW Sec. 2 Twp. 5 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
4626 feet from ☐ N / ☑ S Line of Section
3414 feet from ☑ E / ☐ W Line of Section
County: Norton

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: 1100 psi Injection Zone: GORHAM
Maximum Authorized Injection Rate: 1000 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	3100	1000	0		31
February	2800	1000	0		28
March	3000	1000	0		30
April	3000	1000	0		30
May	3000	1000	0		30
June	2900	1000	0		29
July	3100	1000	0		31
August	3100	1000	0		31
September	3000	1000	0		30
October	3100	1000	0		31
November	3000	1000	0		30
December	2790	1000	0		31
TOTAL	35890		0		

Submitted Electronically