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 # 5822
Name: Val Energy, Inc.
Address 1: 125 N MARKET ST STE 1110
Address 2:
City: WICHITA State: KS Zip: 67202 + 1728
Contact Person: Dustin Wyer
Phone: ( 316 ) 263-6688
Lease Name: HILL TRUST
Well Number: 7-20

API No.: 15-007-23685-00-00
Permit No: D30858.0
Reporting Year: 2017
*(January 1 to December 31)*

____ - ____ - SE - W2 Sec. 20 Twp. 34 S. R. 11 ☐ E ☑ W
*(Q/Q/Q/Q)*
1291 feet from ☐ N / ☑ S Line of Section
2000 feet from ☑ E / ☐ W Line of Section
County: Barber

**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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 8000 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 | 6820 | 0 | 0 | | 31 |
| February | 6160 | 0 | 0 | | 28 |
| March | 6820 | 0 | 0 | | 31 |
| April | 6600 | 0 | 0 | | 30 |
| May | 6820 | 0 | 0 | | 31 |
| June | 6600 | 0 | 0 | | 30 |
| July | 6820 | 0 | 0 | | 31 |
| August | 6820 | 0 | 0 | | 31 |
| September | 6600 | 0 | 0 | | 30 |
| October | 6820 | 0 | 0 | | 31 |
| November | 6160 | 0 | 0 | | 30 |
| December | 6820 | 0 | 0 | | 31 |
| ***TOTAL*** | 79860 | | 0 | | |

Submitted Electronically