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 # 33069
Name: Encore Operating Company
Address 1: PO BOX 27710
Address 2:
City: DENVER State: CO Zip: 80227 + 0710
Contact Person: Jay Johnson
Phone: (303) 324-1414
Lease Name: SHAPLAND LIVING TRUST
Well Number: 3-35

API No.: 15-101-21601-00-02
Permit No: E31410.1
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SE - NW Sec. 35 Twp. 18 S. R. 28 ☐ E ☑ W
(Q/Q/Q/Q)
3479 feet from ☐ N / ☑ S Line of Section
3521 feet from ☑ E / ☐ W Line of Section
County: Lane

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 45000 mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 500 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	3200	0	0		31
February	3000	0	0		28
March	3300	0	0		31
April	3100	0	0		30
May	3350	0	0		31
June	3250	0	0		30
July	3400	0	0		31
August	3400	0	0		31
September	3200	0	0		30
October	3350	0	0		31
November	3250	0	0		30
December	3350	0	0		31
TOTAL	39150		0		

Submitted Electronically