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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N. BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Emma Richmond
Phone: (316) 265-3311
Lease Name: BROOKOVER UNIT
Well Number: 8-17

API No.: 15-171-20059-00-01
Permit No: E27364.2
Reporting Year: 2017
(January 1 to December 31)

____ - SW - SE - SE Sec. 17 Twp. 17 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
517 feet from ☐ N / ☑ S Line of Section
3076 feet from ☑ E / ☐ W Line of Section
County: Scott

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: 800 psi Injection Zone: LKC
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	11336	425	0		31
February	8898	425	0		26
March	10632	425	0		31
April	9665	425	0		29
May	9434	425	0		30
June	9419	425	0		30
July	9753	425	0		31
August	10626	425	0		31
September	10922	425	0		30
October	11312	425	0		31
November	10474	425	0		29
December	9766	425	0		31
TOTAL	122237		0		

Submitted Electronically