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: KRAUS
Well Number: 1

API No.: 15-195-01324-00-02
Permit No: D22417.0
Reporting Year: 2017
(January 1 to December 31)

____ - SE - SE - NW Sec. 15 Twp. 11 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
725 feet from ☐ N / ☑ S Line of Section
726 feet from ☑ E / ☐ W Line of Section
County: Trego

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: 0 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 600 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	155	0	0		31
February	140	0	0		28
March	155	0	0		31
April	150	0	0		30
May	155	0	0		31
June	150	0	0		30
July	155	0	0		31
August	155	0	0		31
September	150	0	0		30
October	155	0	0		31
November	150	0	0		30
December	155	0	0		31
TOTAL	1825		0		

Submitted Electronically