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 # 32557
Name: Bluestem, Inc
Address 1: 1226 W COUNTY LINE RD
Address 2:
City: CEDAR VALE State: KS Zip: 67024 + 9066
Contact Person: Floyd
Phone: (620) 758-2809
Lease Name: MONTGOMERY
Well Number: 2-A

API No.: 15-035-23540-00-01
Permit No: D25401.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SW - SE Sec. 8 Twp. 34 S. R. 8 ☑ E ☐ W
(Q/Q/Q/Q)
990 feet from ☐ N / ☑ S Line of Section
1650 feet from ☑ E / ☐ W Line of Section
County: Cowley

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 300 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	405	0	0		27
February	330	0	0		22
March	420	0	0		28
April	450	0	0		30
May	465	0	0		31
June	450	0	0		30
July	465	0	0		31
August	465	0	0		31
September	0		0		
October	0		0		
November	0		0		
December	0		0		
TOTAL	3450		0		

Submitted Electronically