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 # 6484
Name: Anderson Energy, Inc.
Address 1: 300 W DOUGLAS AVE, STE 410
Address 2:
City: WICHITA State: KS Zip: 67202 + __ __ __ __
Contact Person: William Anderson
Phone: (316) 263-1006
Lease Name: WEYAND
Well Number: 1

API No.: 15-193-20511-00-02
Permit No: E27295.1
Reporting Year: 2017
(January 1 to December 31)

____ - SE - SE - NW Sec. 28 Twp. 8 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
2982 feet from ☐ N / ☑ S Line of Section
3067 feet from ☑ E / ☐ W Line of Section
County: Thomas

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: 300 psi Injection Zone: LANSING A, LANSING B
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	2310	0	0		30
February	2156	0	0		28
March	2387	0	0		31
April	2440	0	0		29
May	2356	0	0		28
June	2103	0	0		25
July	2386	0	0		31
August	2386	0	0		31
September	2309	0	0		30
October	2339	0	0		31
November	2264	0	0		30
December	2339	0	0		31
TOTAL	27775		0		

Submitted Electronically