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 # 33739
Name: SEK Energy, LLC
Address 1: 149 BENEDICT RD
Address 2: PO BOX 55
City: BENEDICT State: KS Zip: 66714 + __ __ __ __
Contact Person: Douglas Lamb
Phone: ( 620 ) 698-2150
Lease Name: TERRELL
Well Number: 4

API No.: 15-019-26691-00-01
Permit No: E28653.1
Reporting Year: 2017
*(January 1 to December 31)*

NW - SE - SW - SE Sec. 2 Twp. 32 S. R. 9 ☑ E ☐ W
*(Q/Q/Q/Q)*
360 feet from ☐ N / ☑ S Line of Section
1875 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

**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: 750 psi Injection Zone: MISSISSIPPI
Maximum Authorized Injection Rate: 900 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 0 | | 0 | | |
| February | 0 | | 0 | | |
| March | 0 | | 0 | | |
| April | 0 | | 0 | | |
| May | 0 | | 0 | | |
| June | 0 | | 0 | | |
| July | 300 | 30 | 0 | | 10 |
| August | 3100 | 30 | 0 | | 31 |
| September | 3000 | 30 | 0 | | 30 |
| October | 3100 | 30 | 0 | | 31 |
| November | 3000 | 30 | 0 | | 30 |
| December | 1500 | 30 | 0 | | 15 |
| ***TOTAL*** | 14000 | | 0 | | |

Submitted Electronically