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 # 5030
Name: Vess Oil Corporation
Address 1: 1700 WATERFRONT PKWY BLDG 500
Address 2:
City: WICHITA State: KS Zip: 67206 + 6619
Contact Person: Michelle Henning
Phone: ( 316 ) 682-1537
Lease Name: HALL B
Well Number: 8D

API No.: 15-051-03455-00-02
Permit No: D18475.0
Reporting Year: 2017
*(January 1 to December 31)*

____ - SW - NW - NW Sec. 26 Twp. 11 S. R. 17 ☐ E ☑ W
*(Q/Q/Q/Q)*
2248 feet from ☐ N / ☑ S Line of Section
4972 feet from ☑ E / ☐ W Line of Section
County: Ellis

**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: Arbuckle
Maximum Authorized Injection Rate: 15000 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 | 77684 | 0 | 0 | | 31 |
| February | 86467 | 0 | 0 | | 28 |
| March | 72172 | 0 | 0 | | 31 |
| April | 69624 | 0 | 0 | | 30 |
| May | 89655 | 0 | 0 | | 31 |
| June | 89407 | 0 | 0 | | 30 |
| July | 59487 | 0 | 0 | | 31 |
| August | 68535 | 0 | 0 | | 31 |
| September | 88012 | 0 | 0 | | 30 |
| October | 92070 | 0 | 0 | | 31 |
| November | 88305 | 0 | 0 | | 30 |
| December | 90637 | 0 | 0 | | 31 |
| ***TOTAL*** | 972055 | | 0 | | |

Submitted Electronically