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: SEAGRAVES/YORK
Well Number: 5

API No.: 15-205-25331-00-00
Permit No: E27800.1
Reporting Year: 2017
(January 1 to December 31)

___ - SW - NW - NE Sec. 1 Twp. 30 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
4290 feet from ☐ N / ☑ S Line of Section
2310 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 500 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 100 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	155	250	0		31
February	140	250	0		28
March	155	250	0		31
April	150	250	0		30
May	155	250	0		31
June	150	250	0		30
July	155	250	0		31
August	155	250	0		31
September	150	250	0		30
October	155	250	0		31
November	150	250	0		30
December	155	250	0		31
TOTAL	1825		0		

Submitted Electronically