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 # 31788
Name: Veenker Resources, Inc.
Address 1: PO BOX 14339
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73113 + 0339
Contact Person: Laurie Stewart
Phone: (405) 751-1414
Lease Name: MEDCALF
Well Number: 29

API No.: 15-011-22260-00-01
Permit No: E24503.10
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SE - NW Sec. 7 Twp. 24 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
3465 feet from ☐ N / ☑ S Line of Section
3465 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 550 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 50 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	625	300	0		30
February	625	300	0		28
March	625	300	0		31
April	625	300	0		25
May	400	300	0		20
June	625	300	0		30
July	625	300	0		29
August	625	300	0		30
September	625	300	0		30
October	625	300	0		31
November	625	300	0		30
December	625	300	0		31
TOTAL	7275		0		

Submitted Electronically