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 # 6143
Name: Somerset Energy, Inc.
Address 1: PO BOX 716
Address 2:
City: LOUISBURG State: KS Zip: 66053 + 0716
Contact Person: Lance Town
Phone: ( 913 ) 710-5400
Lease Name: KUHN
Well Number: 1 W

API No.: 15-121-27325-00-02
Permit No: E29073.1
Reporting Year: 2018
*(January 1 to December 31)*

____ - SE - SE - SW Sec. 16 Twp. 16 S. R. 24 ☑ E ☐ W
*(Q/Q/Q/Q)*
479 feet from ☐ N / ☑ S Line of Section
3213 feet from ☑ E / ☐ W Line of Section
County: Miami

**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: SQUIRREL
Maximum Authorized Injection Rate: 200 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 | 151 | 300 | 0 | 0 | 31 |
| February | 138 | 300 | 0 | 0 | 28 |
| March | 147 | 300 | 0 | 0 | 31 |
| April | 142 | 300 | 0 | 0 | 30 |
| May | 152 | 300 | 0 | 0 | 31 |
| June | 143 | 300 | 0 | 0 | 30 |
| July | 151 | 300 | 0 | 0 | 31 |
| August | 154 | 300 | 0 | 0 | 31 |
| September | 141 | 300 | 0 | 0 | 30 |
| October | 149 | 300 | 0 | 0 | 31 |
| November | 146 | 300 | 0 | 0 | 30 |
| December | 152 | 300 | 0 | 0 | 31 |
| ***TOTAL*** | 1766 | | 0 | | |

Submitted Electronically