

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Lease Name: _____

Well Number: _____

API No.: _____

Permit No.: _____

Reporting Year: _____

(January 1 to December 31)

____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)_____ feet from N / S Line of Section_____ feet from E / W Line of Section

County: _____

I. Injection Fluid:Type (Pick one): Fresh Water Treated Brine Untreated Brine Water/BrineSource: 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: _____ psi Injection Zone: _____

Maximum Authorized Injection Rate: _____ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Submitted Electronically

Chemical Services Inc.

32 NE 40th Ave.
 P.O. Box 1113
 Great Bend, Kansas 67530

Office 620-792-6886

Fax 620-792-6882

WATER ANALYSIS REPORT

Sample No.: 6214

Submitted : 04/19/17

Company : Berenergy
 Location :
 Field :
 Lease/Unit: Maddie Gates #5

Supplier : Chemical Services
 Sampler : Andy Kirkpatrick
 Sample Pt : Bleeder
 Sampled :

BWPD :		BOPD :		MMCF/day:	
Cations	mg/l	meq/l	Anions	mg/l	meq/l
Sodium	28774.5	1251.2	Chloride	51000.0	1437.6
Calcium	3040.0	151.7	Bicarbonate	663.0	10.9
Magnesium	583.0	47.9	Sulfate	125.0	2.6
Iron	2.0	0.1	Carbonate		
Barium	16.0	0.2	Hydroxide		
Strontium			Sulfide	140.0	
Manganese			Carbon dioxide	484.0	
			Oxygen		
pH	9.00				
Specific Gravity	1.05883				
Total Dissolved Solids	: 84203.46 mg/l				
Resistivity, ohm-meters	0.00000 at		°F Calc	0.08955	

SCALING INDICES

Temp, °F	Calcium Carbonate CaCO3	Calcium Sulfate CaSO4	Barium Sulfate BaSO4
50	2.30	-45.30	1.25
75	2.48	-44.95	1.12
100	2.78	-44.39	0.99
125	3.16	-43.63	0.86
150	3.60	-42.65	0.74
175	4.07	-41.46	0.61
200	4.52	-40.05	0.48

A positive scaling index indicates scaling potential.

Remarks:

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WATER ANALYSIS REPORT

Sample No.: 6213

Submitted : 04/19/17

Company : Berenergy
Location :
Field :
Lease/Unit: Maddie Gates B-6

Supplier : Chemical Services
Sampler : Andy Kirkpatrick
Sample Pt : Bleeder
Sampled :

BWPD :

BOPD :

MMCF/day:

Cations	mg/l	meq/l	Anions	mg/l	meq/l
Sodium	18492.2	804.1	Chloride	34000.0	958.4
Calcium	1960.0	97.8	Bicarbonate	776.0	12.7
Magnesium	851.0	70.0	Sulfate	50.0	1.0
Iron	1.8	0.1	Carbonate		
Barium	19.0	0.3	Hydroxide		
Strontium			Sulfide	235.0	
Manganese			Carbon dioxide	537.0	
			Oxygen		

pH 8.00

Specific Gravity 1.04012

Total Dissolved Solids : 56149.99 mg/l

Resistivity, ohm-meters 0.00000 at

°F Calc 0.12858

SCALING INDICES

Temp, °F	Calcium Carbonate CaCO3	Calcium Sulfate CaSO4	Barium Sulfate BaSO4
50	1.22	-48.68	1.07
75	1.40	-47.93	0.95
100	1.69	-46.99	0.82
125	2.06	-45.86	0.70
150	2.49	-44.54	0.58
175	2.94	-43.02	0.45
200	3.38	-41.29	0.33

A positive scaling index indicates scaling potential.

Remarks:

Summary of Changes

Lease Name and Number: MATTIE GATES B 11

Doc ID: 1397430

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	02/28/2018	03/01/2018

Summary of Attachments

Lease Name and Number: MATTIE GATES B 11

API: 15-185-22192-00-01

Doc ID: 1397430

Correction Number: 1

Attachment Name

Mattie Gates B #5 water sample

Mattie Gates B #6 water sample