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 # 32457
Name: Abercrombie Energy, LLC
Address 1: 10209 W. CENTRAL, STE 217
Address 2:
City: WICHITA State: KS Zip: 67212 + __ __ __ __
Contact Person: Grant Galyon
Phone: (316) 262-1841
Lease Name: CHRISTIAN CHURCH
Well Number: 2

API No.: 15-101-21688-00-00
Permit No: D27031.0
Reporting Year: 2018
(January 1 to December 31)

___ - SE - SE - SW Sec. 5 Twp. 16 S. R. 27 ☐ E ☑ W
(Q/Q/Q/Q)
334 feet from ☐ N / ☑ S Line of Section
2964 feet from ☑ E / ☐ W Line of Section
County: Lane

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: CEDAR HILLS
Maximum Authorized Injection Rate: 250 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	1572	0	0		31
February	1467	0	0		28
March	1530	0	0		31
April	1462	0	0		30
May	1311	0	0		31
June	1267	0	0		30
July	1355	0	0		31
August	1358	0	0		31
September	1462	0	0		30
October	1310	0	0		31
November	1512	0	0		30
December	1512	0	0		31
TOTAL	17118		0		

Submitted Electronically