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 # 35363
Name: US Energy Expl. Corp.
Address 1: 237 S. WATER ST.
Address 2:
City: RURAL VALLEY State: PA Zip: 16249 + __ __ __ __
Contact Person: Kevin McCoy
Phone: (724) 783-7624
Lease Name: SOURCE FEE
Well Number: 16-11 SWD

API No.: 15-015-23989-00-00
Permit No: D31727.0
Reporting Year: 2018
(January 1 to December 31)

____ - NW - NW - NW Sec. 16 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
330 feet from ☑ N / ☐ S Line of Section
330 feet from ☐ E / ☑ W Line of Section
County: Butler

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: 1000 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 20000 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	3470	15	0		31
February	4185	15	0		28
March	2823	15	0		31
April	3917	15	0		30
May	3495	15	0		31
June	3822	15	0		30
July	2566	15	0		31
August	2382	15	0		31
September	2666	15	0		30
October	2674	15	0		31
November	2543	15	0		30
December	2242	15	0		31
TOTAL	36785		0		

Submitted Electronically