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 # 30537
Name: Venture Resources, Inc.
Address 1: PO BOX 101234
Address 2:
City: DENVER State: CO Zip: 80250 + 1234
Contact Person: Manda Weien
Phone: (303) 722-2899
Lease Name: HURT ELSIE
Well Number: 5

API No.: 15-195-20174-00-00
Permit No: D16080.0
Reporting Year: 2018
(January 1 to December 31)

____ - SE - NW - NE Sec. 15 Twp. 12 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
2021 feet from ☐ N / ☑ S Line of Section
1468 feet from ☑ E / ☐ W Line of Section
County: Trego

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: 400 psi Injection Zone: Cedar Hills
Maximum Authorized Injection Rate: 1000 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	24263	0	0	0	31
February	22796	0	0	0	28
March	23956	0	0	0	31
April	23543	0	0	0	30
May	25108	0	0	0	31
June	24525	0	0	0	30
July	24996	0	0	0	31
August	24994	0	0	0	31
September	24652	0	0	0	30
October	26271	0	0	0	31
November	25023	0	0	0	30
December	26249	0	0	0	31
TOTAL	296376		0		

Submitted Electronically