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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N. BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Emma Richmond
Phone: (316) 265-3311
Lease Name: CHRISTINA A LEASE
Well Number: 3

API No.: 15-051-20470-00-01
Permit No: E27411.2
Reporting Year: 2018
(January 1 to December 31)

____ - SW - S2 - S2 Sec. 10 Twp. 14 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
321 feet from ☐ N / ☑ S Line of Section
4105 feet from ☑ E / ☐ W Line of Section
County: Ellis

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1250 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	7048	650	0	0	31
February	6163	650	0	0	28
March	6785	650	0	0	31
April	6586	650	0	0	30
May	6718	650	0	0	31
June	6561	650	0	0	30
July	6813	725	0	0	31
August	6633	800	0	0	31
September	6051	800	0	0	30
October	6405	800	0	0	31
November	6168	800	0	0	30
December	6412	850	0	0	31
TOTAL	78343		0		

Submitted Electronically