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: CLARK A
Well Number: 4

API No.: 15-055-21858-00-01
Permit No: E13914.2
Reporting Year: 2018
(January 1 to December 31)

____ - SW - NE - NE Sec. 22 Twp. 22 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
2090 feet from ☐ N / ☑ S Line of Section
3203 feet from ☑ E / ☐ W Line of Section
County: Finney

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: 500 psi Injection Zone: Miss/Pawnee
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	3036	0	0	0	14
August	2972	0	0	0	20
September	1020	0	0	0	16
October	443	0	0	0	10
November	263	0	0	0	30
December	495	0	0	0	12
TOTAL	8229		0		

Submitted Electronically