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 # 3370
Name: Brull, Allen
Address 1: 2146 BUTTERFIELD TRAIL RD
Address 2:
City: VICTORIA State: KS Zip: 67671 + 9621
Contact Person: Allen Brull
Phone: (785) 625-5334
Lease Name: ALEX LEIKER
Well Number: 4

API No.: 15-051-03973-00-01
Permit No: D06368.0
Reporting Year: 2018
(January 1 to December 31)

NE - SW - NW - SW Sec. 2 Twp. 15 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
1655 feet from ☐ N / ☑ S Line of Section
4690 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: _____ 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: 500 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	465	0	0	0	31
February	420	0	0	0	28
March	465	0	0	0	31
April	450	0	0	0	30
May	465	0	0	0	31
June	450	0	0	0	30
July	950	0	0	0	31
August	950	0	0	0	31
September	920	0	0	0	30
October	950	0	0	0	31
November	920	0	0	0	30
December	950	0	0	0	31
TOTAL	8355		0		

Submitted Electronically