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 # 34426
Name: Brickley Enterprises, LLC
Address 1: PO BOX 1118
Address 2:
City: ELDORADO State: KS Zip: 67042 + 1118
Contact Person: Andy Brickley
Phone: (316) 322-7478
Lease Name: DOUGHTY WEST
Well Number: 8

API No.: 15-015-19203-00-01
Permit No: D32277.0
Reporting Year: 2018
(January 1 to December 31)

____ - NE - NE - SE Sec. 6 Twp. 27 S. R. 6 ☑ E ☐ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
4950 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: 500 psi Injection Zone: BARTLESVILLE
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	0				0
February	0				0
March	0				0
April	0				0
May	0				0
June	0				0
July	0				0
August	0				0
September	0				0
October	0				0
November	0				0
December	0				0
TOTAL	0		0		

Submitted Electronically