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 # 31819
Name: Cholla Production, LLC
Address 1: 10490 BRADFORD RD. SUITE 201
Address 2:
City: LITTLETON State: CO Zip: 80127 + __ __ __ __
Contact Person: Emily Hundley-Goff
Phone: (303) 623-4565
Lease Name: BONTRAGER RT
Well Number: 2-29

API No.: 15-171-20921-00-00
Permit No: D31554.0
Reporting Year: 2018
(January 1 to December 31)

SW - SE - NW - SE Sec. 29 Twp. 19 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
914 feet from ☐ N / ☑ S Line of Section
3361 feet from ☑ E / ☐ W Line of Section
County: Scott

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	11	0	0	0	14
February	12	0	0	0	28
March	17	0	0	0	31
April	5	0	0	0	29
May	15	0	0	0	31
June	12	0	0	0	25
July	16	0	0	0	31
August	11	0	0	0	31
September	10	0	0	0	30
October	11	0	0	0	31
November	13	0	0	0	30
December	11	0	0	0	29
TOTAL	144		0		

Submitted Electronically