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 # 30481
Name: Apollo Energies, Inc.
Address 1: 10378 N. US HWY 281
Address 2: 10378 N. US HWY 281
City: PRATT State: KS Zip: 67124 + 7920
Contact Person: Josh Rennaker
Phone: (620) 672-9001
Lease Name: KAUFMAN
Well Number: 4

API No.: 15-167-22267-00-03
Permit No: E14595.2
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SW - SW Sec. 33 Twp. 15 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
333 feet from ☐ N / ☑ S Line of Section
4434 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 1000 psi Injection Zone: CONGLOMERATE,PLATTSMOUTH
Maximum Authorized Injection Rate: 350 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	9300	300	0		31
February	6600	300	0		22
March	9300	300	0		31
April	9000	300	0		30
May	9300	300	0		31
June	9000	300	0		30
July	6000	300	0		20
August	3000	300	0		10
September	0	300	0		0
October	0	300	0		0
November	0	300	0		0
December	3000	300	0		10
TOTAL	64500		0		

Submitted Electronically