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 # 35061
Name: Honey Well, LLC
Address 1: 15621 W 87TH ST. PKWY
Address 2:
City: LENEXA State: KS Zip: 66219 + 1435
Contact Person: Lesli Baker
Phone: (913) 544-5121
Lease Name: BRISTOW
Well Number: I-1

API No.: 15-121-29631-00-00
Permit No: E25289.4
Reporting Year: 2018
(January 1 to December 31)

____ - NW - NE - NW Sec. 27 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4741 feet from ☐ N / ☑ S Line of Section
3618 feet from ☑ E / ☐ W Line of Section
County: Miami

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 240 psi Injection Zone: Peru
Maximum Authorized Injection Rate: 30 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	334	220	0	0	31
February	302	220	0	0	28
March	239	220	0	0	31
April	324	220	0	0	30
May	334	220	0	0	31
June	321	220	0	0	30
July	335	220	0	0	31
August	333	220	0	0	31
September	321	220	0	0	30
October	336	220	0	0	31
November	322	220	0	0	30
December	331	220	0	0	31
TOTAL	3832		0		

Submitted Electronically