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 # 34412
Name: Inferno Energy
Address 1: 1353 105TH RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 5175
Contact Person: Wacey Douglas
Phone: (620) 496-9868
Lease Name: LORANCE A
Well Number: 3

API No.: 15-207-24971-00-01
Permit No: E24328.2
Reporting Year: 2018
(January 1 to December 31)

SE - NW - SE - SW Sec. 25 Twp. 26 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
825 feet from ☐ N / ☑ S Line of Section
3465 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: SQUIRREL SAND
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0				
February	0				
March	110	200			31
April	110	200			30
May	90	200			31
June					
July					
August					
September					
October					
November					
December					
TOTAL	310		0		

Submitted Electronically