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 # 35583
Name: Paradigm Energy LLC
Address 1: 25509 W 95TH LANE UNIT 709
Address 2:
City: LENEXA State: KS Zip: 66227 + __ __ __ __
Contact Person: Brandon Parks
Phone: (720) 377-7397
Lease Name: ALMA
Well Number: I-1

API No.: 15-059-26693-00-00
Permit No: E31999.1
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SW - NW Sec. 20 Twp. 16 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
873 feet from ☐ N / ☑ S Line of Section
2231 feet from ☑ E / ☐ W Line of Section
County: Franklin

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
Maximum Authorized Injection Rate: 100 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	300	320	0	0	31
February	300	320	0	0	28
March	300	320	0	0	31
April	300	320	0	0	30
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	1200		0		

Submitted Electronically