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 # 34817
Name: HB Energy LLC
Address 1: 3137 VIRGINIA RD
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 9103
Contact Person: Isaac Burbank
Phone: (785) 979-9493
Lease Name: SCHULTZ
Well Number: 19

API No.: 15-045-21116-00-00
Permit No: E26082.4
Reporting Year: 2019
(January 1 to December 31)

____ - SE - NW - SE Sec. 13 Twp. 14 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
1773 feet from ☐ N / ☑ S Line of Section
1579 feet from ☑ E / ☐ W Line of Section
County: Douglas

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: 75 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	388	400	0	0	31
February	398	400	0	0	28
March	377	400	0	0	31
April	396	400	0	0	30
May	387	400	0	0	31
June	395	400	0	0	30
July	366	400	0	0	31
August	379	400	0	0	31
September	368	400	0	0	30
October	369	400	0	0	31
November	389	400	0	0	30
December	355	400	0	0	31
TOTAL	4567		0		

Submitted Electronically