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: OYSTER
Well Number: 8

API No.: 15-121-26694-00-01
Permit No: E26786.1
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NE - NW Sec. 14 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
3982 feet from ☐ N / ☑ S Line of Section
3305 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: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 550 psi Injection Zone: CATTLEMAN SAND
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	444	300	0		31
February	499	300	0		28
March	478	300	0		31
April	467	300	0		30
May	505	300	0		31
June	522	300	0		30
July	473	300	0		31
August	422	300	0		31
September	488	300	0		30
October	466	300	0		31
November	467	300	0		30
December	501	300	0		31
TOTAL	5732		0		

Submitted Electronically