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 # 35667
Name: BCE-Mach LLC
Address 1: 14201 WIRELESS WAY, SUITE 300
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73134 + 2521
Contact Person: Amanda Lair
Phone: (405) 252-8168
Lease Name: HIBBARD
Well Number: 1 SWD

API No.: 15-077-21719-00-00
Permit No: D30773.0
Reporting Year: 2019
(January 1 to December 31)

NE - NE - NE - NE Sec. 23 Twp. 34 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
250 feet from ☑ N / ☐ S Line of Section
200 feet from ☑ E / ☐ W Line of Section
County: Harper

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: ARBUCKLE
Maximum Authorized Injection Rate: 15000 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	183202	0	0	0	31
February	153939	0	0	0	28
March	171066	0	0	0	31
April	160651	0	0	0	30
May	173097	0	0	0	31
June	173407	0	0	0	30
July	140796	0	0	0	31
August	135852	0	0	0	31
September	122535	0	0	0	30
October	121531	0	0	0	31
November	123387	0	0	0	30
December	125345	0	0	0	31
TOTAL	1784808		0		

Submitted Electronically