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 # 35311
Name: DA Energy, LLC
Address 1: PO BOX 821
Address 2:
City: LEES SUMMIT State: MO Zip: 64063 + 0821
Contact Person: Andy Danella
Phone: (816) 797-9112
Lease Name: GALLAGHER
Well Number: I-2

API No.: 15-121-31271-00-00
Permit No: E32415.2
Reporting Year: 2019
(January 1 to December 31)

NW - SE - SE - NW Sec. 26 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
3047 feet from ☐ N / ☑ S Line of Section
3116 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: 500 psi Injection Zone: Squirell
Maximum Authorized Injection Rate: 50 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	465	100	0	0	31
February	420	100	0	0	28
March	465	100	0	0	31
April	450	100	0	0	30
May	465	100	0	0	31
June	450	100	0	0	30
July	465	100	0	0	31
August	465	100	0	0	31
September	450	100	0	0	30
October	465	100	0	0	31
November	450	100	0	0	30
December	465	100	0	0	31
TOTAL	5475		0		

Submitted Electronically