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 # 3956
Name: Brungardt Oil and Leasing Inc.
Address 1: 213 W. 7TH STREET
Address 2: PO BOX 871
City: RUSSELL State: KS Zip: 67665 + 0871
Contact Person: Christopher L. Brungardt
Phone: ( 785 ) 483-4975
Lease Name: KOELLING B
Well Number: 1

API No.: 15-141-20121-00-02
Permit No: E28868.1
Reporting Year: 2019
*(January 1 to December 31)*

____ - SE - SE - SE Sec. 25 Twp. 10 S. R. 15 ☐ E ☑ W
*(Q/Q/Q/Q)*
330 feet from ☐ N / ☑ S Line of Section
330 feet from ☑ E / ☐ W Line of Section
County: Osborne

**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: 0 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 160 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 | 900 | 0 | 0 | | 31 |
| February | 800 | 0 | 0 | | 28 |
| March | 1000 | 0 | 0 | | 31 |
| April | 1050 | 0 | 0 | | 30 |
| May | 1100 | 0 | 0 | | 31 |
| June | 900 | 0 | 0 | | 30 |
| July | 1150 | 0 | 0 | | 31 |
| August | 1100 | 0 | 0 | | 31 |
| September | 1050 | 0 | 0 | | 30 |
| October | 1050 | 0 | 0 | | 31 |
| November | 910 | 0 | 0 | | 30 |
| December | 800 | 0 | 0 | | 31 |
| ***TOTAL*** | 11810 | | 0 | | |

Submitted Electronically