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 # 35026
Name: Brant Energy, LLC
Address 1: 962 ROCK CREEK RD
Address 2:
City: POMONA State: KS Zip: 66076 + 8803
Contact Person: Lesli Baker
Phone: (785) 229-6565
Lease Name: CHISAM
Well Number: 2-W

API No.: 15-121-26916-00-00
Permit No: E13055.41
Reporting Year: 2019
(January 1 to December 31)

SE - NW - SE - ____ Sec. 15 Twp. 19 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1888 feet from ☐ N / ☑ S Line of Section
1495 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: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 61 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	309	300	0	0	31
February	280	300	0	0	28
March	305	300	0	0	31
April	300	300	0	0	30
May	310	300	0	0	31
June	300	300	0	0	30
July	309	300	0	0	31
August	304	300	0	0	31
September	298	300	0	0	30
October	301	300	0	0	31
November	286	300	0	0	30
December	290	300	0	0	31
TOTAL	3592		0		

Submitted Electronically