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 # 32325
Name: Popp Operating, Inc.
Address 1: 191 NE 150 RD
Address 2: PO BOX 187
City: HOISINGTON State: KS Zip: 67544 + 0187
Contact Person: RICKEY POPP
Phone: (620) 786-5514
Lease Name: J A KRUG
Well Number: 1

API No.: 15-167-19164-00-01
Permit No: E25715.1
Reporting Year: 2019
(January 1 to December 31)

____ - NE - SE - SE Sec. 8 Twp. 14 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
982 feet from ☐ N / ☑ S Line of Section
498 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 750 psi Injection Zone: PLATTSMOUTH,TARKIO
Maximum Authorized Injection Rate: 750 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	21328	520	0		31
February	19263	520	0		28
March	21154	520	0		31
April	20647	520	0		30
May	21033	510	0		31
June	20433	510	0		30
July	21107	510	0		31
August	20973	510	0		31
September	20366	510	0		30
October	21227	520	0		31
November	20651	520	0		30
December	21288	520	0		31
TOTAL	249470		0		

Submitted Electronically