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 # 34402
Name: Garal, Donna and Vincent Innone Jr. dba VJI Natural Resources, Inc.
Address 1: 3038 48TH ST
Address 2:
City: ASTORIA State: NY Zip: 11103 + 1525
Contact Person: Jason Dinges
Phone: (718) 274-3134
Lease Name: HOLLEY
Well Number: 13-A

API No.: 15-065-22906-00-01
Permit No: D28416.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - NE - NE Sec. 6 Twp. 9 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
4944 feet from ☐ N / ☑ S Line of Section
1190 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 1000 psi Injection Zone: GRANIT WASH
Maximum Authorized Injection Rate: 2000 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	12200				31
February	11300				28
March	12700				31
April	12000				30
May	12700				31
June	12100				30
July	12400				31
August	12700				31
September	12000				30
October	12650				31
November	12200				30
December	12700				31
TOTAL	147650		0		

Submitted Electronically