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: HUBER A
Well Number: 3

API No.: 15-051-21431-00-01
Permit No: D26868.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SW - SW Sec. 32 Twp. 12 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
988 feet from ☐ N / ☑ S Line of Section
5047 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: ARBUCKLE
Maximum Authorized Injection Rate: 3000 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	3100				31
February	2700				28
March	3200				31
April	3100				30
May	3200				31
June	3000				30
July	3200				31
August	3100				31
September	3000				30
October	3200				31
November	3100				30
December	3200				31
TOTAL	37100		0		

Submitted Electronically