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 # 30931
Name: Daystar Petroleum, Inc.
Address 1: 522 N. MAIN ST
Address 2: PO BOX 560
City: EUREKA State: KS Zip: 67045 + 0560
Contact Person: Jennifer Watts
Phone: ( 620 ) 583-5527
Lease Name: MORRISON
Well Number: 4

API No.: 15-185-21657-00-02
Permit No: E32561.1
Reporting Year: 2019
*(January 1 to December 31)*

SW - NW - SE - SW Sec. 21 Twp. 21 S. R. 14 ☐ E ☑ W
*(Q/Q/Q/Q)*
799 feet from ☐ N / ☑ S Line of Section
3936 feet from ☑ E / ☐ W Line of Section
County: Stafford

**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: Simpson Group
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 814 | 0 | 0 | 0 | 31 |
| February | 6505 | 0 | 0 | 0 | 28 |
| March | 8850 | 0 | 0 | 0 | 31 |
| April | 384 | 0 | 0 | 0 | 30 |
| May | 9300 | 0 | 0 | 0 | 31 |
| June | 10928 | 0 | 0 | 0 | 30 |
| July | 9853 | 0 | 0 | 0 | 31 |
| August | 13012 | 0 | 0 | 0 | 31 |
| September | 10730 | 0 | 0 | 0 | 30 |
| October | 12910 | 0 | 0 | 0 | 31 |
| November | 9460 | 0 | 0 | 0 | 30 |
| December | 9566 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 102312 | | 0 | | |

Submitted Electronically