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 # 35473
Name: Streamline Energy, LLC
Address 1: 906 N. MAIN ST
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 1108
Contact Person: Lesli Baker
Phone: ( 785 ) 766-1278
Lease Name: PETERSON B
Well Number: G-110

API No.: 15-125-22251-00-01
Permit No: E29068.7
Reporting Year: 2019
*(January 1 to December 31)*

SW - NW - NE - ____ Sec. 8 Twp. 34 S. R. 14 ☑ E ☐ W
*(Q/Q/Q/Q)*
3943 feet from ☐ N / ☑ S Line of Section
2117 feet from ☑ E / ☐ W Line of Section
County: Montgomery

**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: 675 psi Injection Zone: Wayside
Maximum Authorized Injection Rate: 40 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 | 831 | 275 | 0 | 0 | 31 |
| February | 828 | 275 | 0 | 0 | 28 |
| March | 836 | 275 | 0 | 0 | 31 |
| April | 835 | 275 | 0 | 0 | 30 |
| May | 839 | 275 | 0 | 0 | 31 |
| June | 830 | 275 | 0 | 0 | 30 |
| July | 836 | 275 | 0 | 0 | 31 |
| August | 835 | 275 | 0 | 0 | 31 |
| September | 830 | 275 | 0 | 0 | 30 |
| October | 839 | 275 | 0 | 0 | 31 |
| November | 831 | 275 | 0 | 0 | 30 |
| December | 837 | 275 | 0 | 0 | 31 |
| ***TOTAL*** | 10007 | | 0 | | |

Submitted Electronically