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 # 5684
Name: Sage, Larry George
Address 1: PO BOX 12
Address 2:
City: VIRGIL State: KS Zip: 66870 + 0012
Contact Person: Kelly Sage
Phone: (620) 437-6415
Lease Name: ULRICH
Well Number: 7

API No.: 15-073-22281-00-00
Permit No: D20980.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - SE - SW Sec. 6 Twp. 24 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
1014 feet from ☐ N / ☑ S Line of Section
3316 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 1550 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	1000	0			31
February	1000	0			29
March	1000	0			31
April	1000	0			30
May	1000	0			31
June	1000	0			30
July	1000	0			31
August	1000	0			31
September	1000	0			30
October	1000	0			31
November	1000	0			30
December	1000	0			31
TOTAL	12000		0		

Submitted Electronically