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: A 9

API No.: 15-073-22664-00-00
Permit No: D22409.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - NW Sec. 7 Twp. 24 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4793 feet from ☐ N / ☑ S Line of Section
5049 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: 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	4000	0			31
February	4000	0			29
March	4000	0			31
April	4000	0			30
May	4000	0			31
June	4000	0			30
July	4000	0			31
August	4000	0			31
September	4000	0			30
October	4000	0			31
November	4000	0			30
December	4000	0			31
TOTAL	48000		0		

Submitted Electronically