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 # 35354
Name: Black Oak Exploration, LLC
Address 1: 1474 S. ST. PAUL ST.
Address 2:
City: DENVER State: CO Zip: 80210 + 2514
Contact Person: Clayton Camozzi
Phone: (303) 968-4999
Lease Name: FRISBIE FAMILY
Well Number: 2-14 SWD

API No.: 15-153-21252-00-00
Permit No: D34011.0
Reporting Year: 2020
(January 1 to December 31)

SE - NE - NW - SW Sec. 14 Twp. 2 S. R. 36 ☐ E ☑ W
(Q/Q/Q/Q)
2220 feet from ☐ N / ☑ S Line of Section
1250 feet from ☐ E / ☑ W Line of Section
County: Rawlins

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: 250 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 5000 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	1163	0	0	0	7
December	8925	0	0	0	31
TOTAL	10088		0		

Submitted Electronically