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 # 32255
Name: Kansas Energy Company, L.L.C.
Address 1: PO BOX 68
Address 2:
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: P.J. Buck
Phone: (620) 725-3636
Lease Name: BECK
Well Number: 1-DIS

API No.: 15-019-26746-00-00
Permit No: D28962.0
Reporting Year: 2020
(January 1 to December 31)

NE - SE - NE - NW Sec. 1 Twp. 35 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
4375 feet from ☐ N / ☑ S Line of Section
2870 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 400 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 500 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	3100	350	0	0	31
February	2900	350	0	0	29
March	3100	350	0	0	31
April	3000	350	0	0	30
May	3100	350	0	0	31
June	3000	350	0	0	30
July	3100	350	0	0	31
August	3100	350	0	0	31
September	3000	350	0	0	30
October	3100	350	0	0	31
November	3000	350	0	0	30
December	3100	350	0	0	31
TOTAL	36600		0		

Submitted Electronically