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 # 5399
Name: Trek AEC, LLC
Address 1: 200 W DOUGLAS, SUITE 101
Address 2:
City: WICHITA State: KS Zip: 67202 + 3001
Contact Person: Mindy Wooten
Phone: (316) 201-1134
Lease Name: DEAN
Well Number: 2 SWD

API No.: 15-063-20872-00-01
Permit No: D23786.0
Reporting Year: 2020
(January 1 to December 31)

NW - NE - SE - ____ Sec. 4 Twp. 15 S. R. 29 ☐ E ☑ W
(Q/Q/Q/Q)
1991 feet from ☐ N / ☑ S Line of Section
690 feet from ☑ E / ☐ W Line of Section
County: Gove

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: Cedar Hills
Maximum Authorized Injection Rate: 250 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	1082	0	0	0	23
February	0	0	0	0	0
March	0	0	0	0	0
April	1201	0	0	0	30
May	1201	0	0	0	31
June	648	0	0	0	16
July	1003	0	0	0	26
August	1201	0	0	0	31
September	1201	0	0	0	30
October	1201	0	0	0	31
November	1201	0	0	0	30
December	1201	0	0	0	31
TOTAL	11140		0		

Submitted Electronically