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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 # 30481
Name: Apollo Energies, Inc.
Address 1: 10378 N 281 HWY
Address 2:
City: PRATT State: KS Zip: 67124 + 7920
Contact Person: Josh Rennaker
Phone: ( 620 ) 672-9001
Lease Name: BREHM
Well Number: 1

API No.: 15-151-05148-00-01
Permit No: D15798.0
Reporting Year: 2020
*(January 1 to December 31)*

____ - NE - NE - SW Sec. 30 Twp. 28 S. R. 13 ☐ E ☑ W
*(Q/Q/Q/Q)*
2320 feet from ☐ N / ☑ S Line of Section
2990 feet from ☑ E / ☐ W Line of Section
County: Pratt

**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: 500 psi Injection Zone: ARBUCKLE,KANSAS CITY
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 | 4960 | 320 | 0 | 0 | 31 |
| February | 4480 | 320 | 0 | 0 | 28 |
| March | 4960 | 300 | 0 | 0 | 31 |
| April | 4800 | 310 | 0 | 0 | 30 |
| May | 4960 | 320 | 0 | 0 | 31 |
| June | 4800 | 340 | 0 | 0 | 30 |
| July | 4960 | 320 | 0 | 0 | 31 |
| August | 4960 | 340 | 0 | 0 | 31 |
| September | 4800 | 320 | 0 | 0 | 30 |
| October | 4360 | 320 | 0 | 0 | 31 |
| November | 4600 | 300 | 0 | 0 | 30 |
| December | 4960 | 320 | 0 | 0 | 31 |
| ***TOTAL*** | 57600 | | 0 | | |

Submitted Electronically