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: FERRELL
Well Number: 29

API No.: 15-015-21181-00-01
Permit No: E05287.2
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SE - SW Sec. 21 Twp. 28 S. R. 8 ☑ E ☐ W
(Q/Q/Q/Q)
957 feet from ☐ N / ☑ S Line of Section
2881 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 900 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 600 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	900	650	0	0	2
February	13050	650	0	0	29
March	13950	650	0	0	31
April	13500	650	0	0	30
May	13950	650	0	0	31
June	13500	650	0	0	30
July	13950	650	0	0	31
August	4950	650	0	0	11
September	11250	650	0	0	25
October	13950	650	0	0	31
November	11250	650	0	0	25
December	13950	650	0	0	31
TOTAL	138150		0		

Submitted Electronically