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 # 4419
Name: Bear Petroleum, LLC
Address 1: PO BOX 438
Address 2:
City: HAYSVILLE State: KS Zip: 67060 + 0438
Contact Person: Shannon Howland
Phone: (316) 524-1225
Lease Name: SU-RAY ORE
Well Number: 5

API No.: 15-035-19459-00-01
Permit No: E09056.5
Reporting Year: 2020
(January 1 to December 31)

NW - NW - SW - ____ Sec. 24 Twp. 31 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
4950 feet from ☑ E / ☐ W Line of Section
County: Cowley

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: 1200 psi Injection Zone: Layton A
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	10335	0	0	0	31
February	9695	0	0	0	28
March	12860	0	0	0	31
April	16500	0	0	0	30
May	10495	0	0	0	31
June	7883	0	0	0	30
July	6814	0	0	0	31
August	9211	0	0	0	31
September	9264	0	0	0	30
October	9674	0	0	0	31
November	9803	0	0	0	30
December	11057	0	0	0	31
TOTAL	123591		0		

Submitted Electronically