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 # 35523
Name: 3G Production, LLC
Address 1: 10387 NE SR 61
Address 2: PO BOX 847
City: PRATT State: KS Zip: 67124 + 0847
Contact Person: Kenneth C Gates
Phone: (620) 672-2531
Lease Name: THORPE OWWO
Well Number: 1

API No.: 15-097-20513-00-02
Permit No: D30882.0
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - NE - SE Sec. 24 Twp. 28 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
1967 feet from ☐ N / ☑ S Line of Section
666 feet from ☑ E / ☐ W Line of Section
County: Kiowa

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: KANSAS CITY
Maximum Authorized Injection Rate: 1000 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically