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 # 33245
Name: Cross Bar Energy, LLC
Address 1: 1700 N. WATERFRONT PKWY BLDG 300, STE A
Address 2:
City: WICHITA State: KS Zip: 67206 + 6614
Contact Person: ANDREW BRENSING
Phone: (316) 239-6151
Lease Name: BURKETT B
Well Number: BW 17

API No.: 15-073-01108-00-00
Permit No: E00817.11
Reporting Year: 2020
(January 1 to December 31)

____ - NE - NE - SW Sec. 13 Twp. 23 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
2610 feet from ☐ N / ☑ S Line of Section
2648 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: ____ psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: ____ 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	3627	650	0		31
February	3276	650	0		28
March	3627	650	0		31
April	3510	650	0		30
May	3627	650	0		31
June	3510	650	0		30
July	3627	650	0		31
August	3627	650	0		31
September	3510	650	0		30
October	3627	650	0		31
November	3510	650	0		30
December	3627	650	0		31
TOTAL	42705		0		

Submitted Electronically