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 # 35513
Name: Fossil Creek Energy, LLC
Address 1: PO BOX 915
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0915
Contact Person: Gavin Ramsay
Phone: (785) 310-9799
Lease Name: BOXBERGER A
Well Number: 8

API No.: 15-167-19306-00-01
Permit No: E07619.2
Reporting Year: 2020
(January 1 to December 31)

NW - SW - SE - ____ Sec. 26 Twp. 14 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
965 feet from ☐ N / ☑ S Line of Section
2405 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 1250 psi Injection Zone: Lansing-Kansas City
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	1841	0	0	0	24
February	1543	0	0	0	22
March	948	0	0	0	16
April	1137	0	0	0	12
May	162	0	0	0	6
June	1162	0	0	0	23
July	948	0	0	0	21
August	1327	0	0	0	28
September	1110	0	0	0	21
October	1002	0	0	0	19
November	460	0	0	0	10
December	0	0	0	0	0
TOTAL	11640		0		

Submitted Electronically