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 # 35278
Name: Eleven Eleven Investments, LLC
Address 1: 1401 W. 42ND ST.
Address 2:
City: HAYS State: KS Zip: 67601 + 1408
Contact Person: Brian Karlin
Phone: (785) 623-3290
Lease Name: NUSS
Well Number: 1 (SWD)

API No.: 15-051-20926-00-02
Permit No: D25588.0
Reporting Year: 2020
(January 1 to December 31)

SW - SW - NW - NE Sec. 5 Twp. 13 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
4261 feet from ☐ N / ☑ S Line of Section
2433 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	4355	0	0	0	31
February	3050	0	0	0	28
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	7405		0		

Submitted Electronically