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 # 5030
Name: Vess Oil Corporation
Address 1: 1700 N WATERFRONT PKWY BLDG 500
Address 2:
City: WICHITA State: KS Zip: 67206 + 6619
Contact Person: Michelle Henning
Phone: ( 316 ) 682-1537
Lease Name: M E WATKINS
Well Number: 9

API No.: 15-051-22518-00-01
Permit No: D21616.0
Reporting Year: 2020
*(January 1 to December 31)*

____ - SE - SW - SW Sec. 2 Twp. 11 S. R. 18 ☐ E ☑ W
*(Q/Q/Q/Q)*
363 feet from ☐ N / ☑ S Line of Section
4440 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: ARBUCKLE,GRANIT WASH
Maximum Authorized Injection Rate: 10000 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 | 177597 | | | | 31 |
| February | 160676 | | | | 29 |
| March | 173641 | | | | 31 |
| April | 157936 | | | | 30 |
| May | 0 | | | | |
| June | 0 | | | | |
| July | 109823 | | | | 31 |
| August | 206982 | | | | 31 |
| September | 174548 | | | | 30 |
| October | 200382 | | | | 31 |
| November | 209300 | | | | 30 |
| December | 182546 | | | | 31 |
| ***TOTAL*** | 1753431 | | 0 | | |

Submitted Electronically