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 # 30537
Name: Venture Resources, Inc.
Address 1: PO BOX 101234
Address 2:
City: DENVER State: CO Zip: 80250 + 1234
Contact Person: Manda Weien
Phone: (303) 722-2899
Lease Name: WILLIAMS SWD
Well Number: 3-2

API No.: 15-163-04051-00-06
Permit No: D25864.0
Reporting Year: 2020
(January 1 to December 31)

W2 - NW - SE - NE Sec. 8 Twp. 10 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
3633 feet from ☐ N / ☑ S Line of Section
1114 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 250 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	1479	0	0	0	31
February	1379	0	0	0	29
March	1474	0	0	0	31
April	1426	0	0	0	30
May	1472	0	0	0	31
June	1424	0	0	0	30
July	1472	0	0	0	31
August	1474	0	0	0	31
September	1327	0	0	0	30
October	1389	0	0	0	31
November	1344	0	0	0	30
December	1389	0	0	0	31
TOTAL	17049		0		

Submitted Electronically