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: OSWALD
Well Number: #6 SWD

API No.: 15-163-22401-00-01
Permit No: D23830.0
Reporting Year: 2020
(January 1 to December 31)

____ - SE - SE - SW Sec. 11 Twp. 9 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
329 feet from ☐ N / ☑ S Line of Section
3093 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: Arbuckle
Maximum Authorized Injection Rate: 3000 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	14558	0	0	0	31
February	13713	0	0	0	29
March	14781	0	0	0	31
April	14140	0	0	0	30
May	13518	0	0	0	31
June	13134	0	0	0	30
July	14674	0	0	0	31
August	14622	0	0	0	31
September	17691	0	0	0	30
October	18295	0	0	0	31
November	17658	0	0	0	30
December	18298	0	0	0	31
TOTAL	185082		0		

Submitted Electronically