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 # 33739
Name: SEK Energy, LLC
Address 1: 149 BENEDICT RD
Address 2: PO BOX 55
City: BENEDICT State: KS Zip: 66714 + 0055
Contact Person: Douglas Lamb
Phone: ( 620 ) 698-2150
Lease Name: BAUMAN SOUTH
Well Number: WIW 1

API No.: 15-205-26130-00-00
Permit No: D28634.0
Reporting Year: 2020
*(January 1 to December 31)*

____ - NW - NW - NE Sec. 13 Twp. 30 S. R. 15 ☑ E ☐ W
*(Q/Q/Q/Q)*
4835 feet from ☐ N / ☑ S Line of Section
2426 feet from ☑ E / ☐ W Line of Section
County: Wilson

**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: 200 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 8000 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 | 0 | | 0 | | |
| February | 0 | | 0 | | |
| March | 0 | | 0 | | |
| April | 0 | | 0 | | |
| May | 0 | | 0 | | |
| June | 1500 | 20 | 0 | | 25 |
| July | 1550 | 20 | 0 | | 31 |
| August | 1500 | 20 | 0 | | 30 |
| September | 1550 | 20 | 0 | | 30 |
| October | 1500 | 20 | 0 | | 31 |
| November | 1500 | 20 | 0 | | 30 |
| December | 1550 | 20 | 0 | | 31 |
| ***TOTAL*** | 10650 | | 0 | | |

Submitted Electronically