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 # 33513
Name: Five Star Energy, Inc.
Address 1: 215 E 14TH ST
Address 2:
City: HARPER State: KS Zip: 67058 + 1407
Contact Person: DAN SHORT
Phone: (620) 896-2710
Lease Name: KUHNS
Well Number: 3

API No.: 15-033-20821-00-01
Permit No: D28835.0
Reporting Year: 2020
(January 1 to December 31)

NW - SE - NE - NE Sec. 34 Twp. 34 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
4496 feet from ☐ N / ☑ S Line of Section
506 feet from ☑ E / ☐ W Line of Section
County: Comanche

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,SIMPSON
Maximum Authorized Injection Rate: 1500 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	17050				23
February	15950				29
March	18950				29
April	22050				28
May	19850				23
June	8250				15
July	0				0
August	0				0
September	6600				19
October	16500				30
November	16500				30
December	17050				31
TOTAL	158750		0		

Submitted Electronically