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 # 33725
Name: Foundation Energy Management, LLC
Address 1: 5057 KELLER SPRINGS RD, SUITE 650
Address 2:
City: ADDISON State: TX Zip: 75001 + 6583
Contact Person: Alyssa Beard
Phone: (303) 244-8114
Lease Name: LAMPE SWD
Well Number: 1

API No.: 15-023-20802-00-00
Permit No: D28903.0
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SW - NW Sec. 33 Twp. 3 S. R. 41 ☐ E ☑ W
(Q/Q/Q/Q)
1800 feet from ☑ N / ☐ S Line of Section
1110 feet from ☐ E / ☑ W Line of Section
County: Cheyenne

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: 500 psi Injection Zone: CEDAR HILLS
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	3017	0	0		31
February	1977	0	0		29
March	2254	0	0		31
April	2801	0	0		30
May	3679	0	0		31
June	2763	0	0		30
July	1549	0	0		31
August	1479	0	0		31
September	1737	0	0		30
October	4020	0	0		31
November	3740	0	0		30
December	2940	0	0		31
TOTAL	31956		0		

Submitted Electronically