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 # 35363
Name: US Energy Expl. Corp.
Address 1: 237 S. WATER ST.
Address 2:
City: RURAL VALLEY State: PA Zip: 16249 + __ __ __ __
Contact Person: Joann Blose
Phone: (724) 783-7624
Lease Name: SOURCE FEE
Well Number: 16-11 SWD

API No.: 15-015-23989-00-00
Permit No: D31727.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - NW Sec. 16 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
330 feet from ☑ N / ☐ S Line of Section
330 feet from ☐ E / ☑ W Line of Section
County: Butler

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: 1000 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 20000 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	2496	-15	0		12
February	2995	-15	0		11
March	3277	-15	0		12
April	2372	-15	0		8
May	2318	-15	0		6
June	1533	-15	0		9
July	1347	-15	0		12
August	2072	-15	0		11
September	2274	-15	0		8
October	1835	-15	0		10
November	2521	-15	0		10
December	1789	-15	0		13
TOTAL	26829		0		

Submitted Electronically