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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N. BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Emma Richmond
Phone: (316) 265-3311
Lease Name: J C SHEARER
Well Number: 2

API No.: 15-135-19054-00-01
Permit No: D04417.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NE - SW Sec. 23 Twp. 17 S. R. 25 ☐ E ☑ W
(Q/Q/Q/Q)
1685 feet from ☐ N / ☑ S Line of Section
3590 feet from ☑ E / ☐ W Line of Section
County: Ness

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 50 psi Injection Zone: Viola
Maximum Authorized Injection Rate: 4000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	34014	0	0	0	31
February	33166	0	0	0	29
March	36017	0	0	0	31
April	33876	0	0	0	30
May	34823	0	0	0	31
June	33910	0	0	0	30
July	33619	0	0	0	31
August	33530	0	0	0	31
September	35022	0	0	0	30
October	36061	0	0	0	31
November	35115	0	0	0	30
December	36178	0	0	0	31
TOTAL	415331		0		

Submitted Electronically