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: KANE UT
Well Number: 2-14

API No.: 15-097-20312-00-02
Permit No: E32612.2
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - SE - SE Sec. 14 Twp. 30 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
553 feet from ☐ N / ☑ S Line of Section
671 feet from ☑ E / ☐ W Line of Section
County: Kiowa

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: 1400 psi Injection Zone: Miss
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 5 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	2682	0	0	0	23
February	235	0	0	0	2
March	3875	0	0	0	31
April	3750	0	0	0	30
May	3875	0	0	0	31
June	3985	0	0	0	30
July	2366	0	0	0	31
August	2410	0	0	0	31
September	2282	0	0	0	26
October	2341	0	0	0	31
November	2140	0	0	0	30
December	2176	0	0	0	31
TOTAL	32117		0		

Submitted Electronically