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 # 34426
Name: Brickley Enterprises, LLC
Address 1: PO BOX 1118
Address 2:
City: ELDORADO State: KS Zip: 67042 + 1118
Contact Person: Andy Brickley
Phone: (316) 322-7478
Lease Name: MANNING
Well Number: 2A

API No.: 15-015-22621-00-00
Permit No: D23791.0
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SW - SW Sec. 5 Twp. 26 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
1014 feet from ☐ N / ☑ S Line of Section
4415 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: 0 psi Injection Zone: ARBUCKLE
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	450	0			18
February	200	0			12
March	550	0			20
April	0	0			0
May	0	0			0
June	0	0	0		0
July	0	0			0
August	1150	0			31
September	850	0			25
October	775	0			22
November	0	0			0
December	500				20
TOTAL	4475		0		

Submitted Electronically