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 # 35497
Name: RedBud Oil & Gas Operating, LLC
Address 1: 16000 STUEBNER AIRLINE RD SUITE 320
Address 2:
City: SPRING State: TX Zip: 77379 + 7396
Contact Person: Kimberlee Dixon
Phone: (832) 698-4901
Lease Name: CASEY
Well Number: 8-21 SWD

API No.: 15-125-19775-00-01
Permit No: D28249.0
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SE - NE Sec. 21 Twp. 32 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
3770 feet from ☐ N / ☑ S Line of Section
415 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: 300 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	23319	0	0	0	31
February	23073	0	0	0	29
March	23709	0	0	0	31
April	23155	0	0	0	30
May	24255	0	0	0	31
June	23018	0	0	0	30
July	22359	0	0	0	30
August	23112	0	0	0	31
September	23119	0	0	0	30
October	23904	0	0	0	31
November	20912	0	0	0	30
December	21169	0	0	0	31
TOTAL	275104		0		

Submitted Electronically