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 # 32278
Name: Tengasco, Inc.
Address 1: 8000 E Maplewood Ave
Address 2: Suite 130
City: Greenwood Village State: CO Zip: 80111 + 0458
Contact Person: John Keller
Phone: ( 785 ) 259-0378
Lease Name: ROSE
Well Number: 9

API No.: 15-009-24373-00-01
Permit No: D25805.0
Reporting Year: 2020
*(January 1 to December 31)*

S2 - N2 - SE - NE Sec. 3 Twp. 20 S. R. 11 ☐ E ☑ W
*(Q/Q/Q/Q)*
3494 feet from ☐ N / ☑ S Line of Section
753 feet from ☑ E / ☐ W Line of Section
County: Barton

**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: 500 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 | 229 | 0 | 0 | 0 | 31 |
| February | 214 | 0 | 0 | 0 | 29 |
| March | 229 | 0 | 0 | 0 | 31 |
| April | 302 | 0 | 0 | 0 | 30 |
| May | 74 | 0 | 0 | 0 | 31 |
| June | 72 | 0 | 0 | 0 | 30 |
| July | 74 | 0 | 0 | 0 | 31 |
| August | 74 | 0 | 0 | 0 | 31 |
| September | 90 | 0 | 0 | 0 | 30 |
| October | 93 | 0 | 0 | 0 | 31 |
| November | 90 | 0 | 0 | 0 | 30 |
| December | 93 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 1634 | | 0 | | |

Submitted Electronically