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 # 35016
Name: Rierson Energy, LLC
Address 1: 1953 COCHISE
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 2757
Contact Person: Rory Rierson
Phone: (620) 7552653
Lease Name: GOERING
Well Number: A-1

API No.: 15-079-19111-00-01
Permit No: E06889.1
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - NE Sec. 2 Twp. 22 S. R. 3 ☐ E ☑ W
(Q/Q/Q/Q)
4966 feet from ☐ N / ☑ S Line of Section
2387 feet from ☑ E / ☐ W Line of Section
County: Harvey

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: 1000 psi Injection Zone: HUNTON
Maximum Authorized Injection Rate: 10000 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	38750				31
February	36250				29
March	38750				31
April	37500				30
May	38750				31
June	37500				30
July	38750				31
August	38750				31
September	37500				30
October	38750				31
November	37500				30
December	38750				31
TOTAL	457500		0		

Submitted Electronically