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 # 33993
Name: Quest Energy LLC
Address 1: 2732 N REESE RD
Address 2:
City: BROOKVILLE State: KS Zip: 67425 + 9812
Contact Person: Tracy Hynes
Phone: (785) 819-3034
Lease Name: KRUSE UNIT
Well Number: 203-W

API No.: 15-163-19375-00-02
Permit No: E10258.2
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NW - SE Sec. 2 Twp. 10 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
1659 feet from ☐ N / ☑ S Line of Section
2385 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 1200 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 600 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	0	0			0
February	0	0			0
March	0	0			0
April	2700	200			30
May	4500	200			31
June	4500	200			30
July	0	0			0
August	0	0			0
September	0	0			0
October	0	0			0
November	0	0			0
December	1500	200			10
TOTAL	13200		0		

Submitted Electronically