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 # 34569
Name: Sonoma Resources LLC
Address 1: PO BOX 731
Address 2:
City: ANDOVER State: KS Zip: 67002 + 0731
Contact Person: Dan Flowers
Phone: (316) 208-7590
Lease Name: DOHREN A
Well Number: 8

API No.: 15-015-19552-00-01
Permit No: E08391.2
Reporting Year: 2020
(January 1 to December 31)

___ - SE - NE - NW Sec. 11 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
4091 feet from ☐ N / ☑ S Line of Section
3100 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: 600 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 400 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	3100	350			31
February	2800	350			28
March	3100	350			31
April	3000	350			30
May	3100	350			31
June	3000	350			30
July	3100	350			31
August	3100	350			31
September	3000	350			30
October	3100	350			31
November	3000	350			30
December	3100	350			31
TOTAL	36500		0		

Submitted Electronically