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: HOUSTON
Well Number: 1

API No.: 15-015-01262-00-01
Permit No: D10194.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - NE Sec. 12 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
4933 feet from ☐ N / ☑ S Line of Section
2334 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: 800 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 300 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	2800	500			28
March	3000	500			31
April	0	0			0
May	0	0			0
June	0	0			0
July	3100	500			31
August	3000	500			30
September	0	0			0
October	0	0			0
November	3000	500			30
December	3100	500			31
TOTAL	18000		0		

Submitted Electronically