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 # 35588
Name: Little Chief Energy Corporation
Address 1: PO BOX 965
Address 2:
City: INDEPENDENCE State: KS Zip: 67301 + 0965
Contact Person: Keaton Boles
Phone: (620) 988-0136
Lease Name: DECKER
Well Number: A1

API No.: 15-113-21104-00-01
Permit No: D23522.0
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - SW - SW Sec. 20 Twp. 19 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
674 feet from ☐ N / ☑ S Line of Section
4600 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 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	85000	0			31
February	80000	0			29
March	65000	0			31
April	70000	0			30
May	72500	0			31
June	75000	0			30
July	85000	0			31
August	85000	0			31
September	82500	0			30
October	85000	0			31
November	82500	0			30
December	85000	0			31
TOTAL	952500		0		

Submitted Electronically