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 # 34463
Name: Eitel Energy, LLC
Address 1: 21 E. LAKE RD.
Address 2:
City: FARLINGTON State: KS Zip: 66734 + 4043
Contact Person: Lesli Baker
Phone: (620) 362-3163
Lease Name: ELMER (ALBERT)
Well Number: F-2

API No.: 15-037-21293-00-00
Permit No: E23622.1
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NW - NE Sec. 30 Twp. 27 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4290 feet from ☐ N / ☑ S Line of Section
2384 feet from ☑ E / ☐ W Line of Section
County: Crawford

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 550 psi Injection Zone: Tucker
Maximum Authorized Injection Rate: 55 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	770	440	0	0	31
February	718	440	0	0	29
March	763	440	0	0	31
April	745	440	0	0	30
May	760	440	0	0	31
June	748	440	0	0	30
July	767	440	0	0	31
August	765	440	0	0	31
September	754	440	0	0	30
October	762	440	0	0	31
November	751	440	0	0	30
December	766	440	0	0	31
TOTAL	9069		0		

Submitted Electronically