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 # 5822
Name: Val Energy, Inc.
Address 1: 125 N MARKET ST STE 1110
Address 2:
City: WICHITA State: KS Zip: 67202 + 1728
Contact Person: Dustin Wyer
Phone: (316) 263-6688
Lease Name: MARY DIEL
Well Number: 2-29

API No.: 15-007-23427-00-00
Permit No: D30438.0
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NE - SE Sec. 29 Twp. 34 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
2284 feet from ☐ N / ☑ S Line of Section
357 feet from ☑ E / ☐ W Line of Section
County: Barber

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: 8000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(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	0	31
February	0	0	0	0	28
March	0	0	0	0	31
April	0	0	0	0	30
May	0	0	0	0	31
June	0	0	0	0	30
July	0	0	0	0	31
August	2250	0	0	0	31
September	4500	0	0	0	30
October	4650	0	0	0	31
November	4500	0	0	0	30
December	4650	0	0	0	31
TOTAL	20550		0		

Submitted Electronically