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 # 5610
Name: Bruce Oil Company, L.L.C.
Address 1: 1704 LIMESTONE RD
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 6500
Contact Person: Levi Koehn
Phone: (620) 241-2938
Lease Name: WILSON
Well Number: 4

API No.: 15-041-20026-00-00
Permit No: D18302.0
Reporting Year: 2021
(January 1 to December 31)

W2 - W2 - SE - SW Sec. 5 Twp. 15 S. R. 1 ☑ E ☐ W
(Q/Q/Q/Q)
645 feet from ☐ N / ☑ S Line of Section
3785 feet from ☑ E / ☐ W Line of Section
County: Dickinson

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 700 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	750	0	0	0	30
February	700	0	0	0	28
March	775	0	0	0	31
April	750	0	0	0	30
May	775	0	0	0	31
June	750	0	0	0	30
July	775	0	0	0	31
August	775	0	0	0	31
September	750	0	0	0	30
October	775	0	0	0	31
November	750	0	0	0	30
December	0	0	0	0	0
TOTAL	8325		0		

Submitted Electronically