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 # 3089
Name: Blue Top Crude Oil Co., Inc.
Address 1: 85 W. LAKE RD.
Address 2:
City: FARLINGTON State: KS Zip: 66734 + 4040
Contact Person: James Vietti
Phone: (913) 927-2643
Lease Name: HOLTMAN
Well Number: I 9

API No.: 15-037-19731-00-00
Permit No: E09856.10
Reporting Year: 2021
(January 1 to December 31)

____ - NE - SW - NE Sec. 2 Twp. 28 S. R. 23 ☑ E ☐ W
(Q/Q/Q/Q)
3744 feet from ☐ N / ☑ S Line of Section
1654 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: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 175 psi Injection Zone: Peru
Maximum Authorized Injection Rate: 200 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	0	0
February		0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May		0	0	0	0
June	135	130	0	0	15
July	216	130	0	0	24
August	0	0	0	0	0
September	0	0	0	0	0
October		0	0	0	0
November		0	0	0	0
December		0	0	0	0
TOTAL	351		0		

Submitted Electronically