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: GRANNEMAN
Well Number: I 8

API No.: 15-037-20066-00-02
Permit No: E14980.4
Reporting Year: 2021
*(January 1 to December 31)*

____ - SE - SE - NE Sec. 3 Twp. 28 S. R. 23 ☑ E ☐ W
*(Q/Q/Q/Q)*
3163 feet from ☐ N / ☑ S Line of Section
514 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: 184 psi Injection Zone: Peru
Maximum Authorized Injection Rate: 20 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 | 0 |
| March | 0 | 0 | 0 | 0 | 0 |
| April | 0 | 0 | 0 | 0 | 0 |
| May | 0 | 0 | 0 | 0 | 0 |
| June | 0 | 0 | 0 | 0 | 0 |
| July | 126 | 130 | 0 | 0 | 14 |
| August | 90 | 130 | 0 | 0 | 10 |
| September | 0 | 0 | 0 | 0 | 0 |
| October | 0 | 0 | 0 | 0 | 0 |
| November | | 0 | 0 | 0 | 0 |
| December | | 0 | 0 | 0 | 0 |
| ***TOTAL*** | 216 | | 0 | | |

Submitted Electronically