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 # 34562
Name: Imperator Investments LLC
Address 1: 6712 MILL CREEK RD
Address 2:
City: SHAWNEE State: KS Zip: 66217 + 9546
Contact Person: john wires
Phone: (816) 852-0011
Lease Name: HERDER
Well Number: 9

API No.: 15-001-23108-00-01
Permit No: E21964.3
Reporting Year: 2021
(January 1 to December 31)

____ - SE - NW - SE Sec. 28 Twp. 25 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
1943 feet from ☐ N / ☑ S Line of Section
1505 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 400 psi Injection Zone: BARTLESVILLE
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					
February					
March					
April					
May					
June					
July					
August					
September	4				30
October	5				30
November	5				30
December	3				30
TOTAL	17		0		

Submitted Electronically