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 # 6009
Name: Double Eagle Exploration, Inc.
Address 1: c/o Larry Miller
Address 2: 2404 NW Valley View Drive
City: Lees Summit State: MO Zip: 64081 + ___ ___ ___ ___
Contact Person: Harold Bellerive
Phone: (785) 635-4531
Lease Name: WONDRA
Well Number: 4

API No.: 15-009-22875-00-00
Permit No: D21229.0
Reporting Year: 2021
(January 1 to December 31)

____ - ____ - ____ - NW Sec. 7 Twp. 17 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
3563 feet from ☐ N / ☑ S Line of Section
3817 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 300 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	760	0	0		31
February	750	0	0		28
March	730	0	0		31
April	740	0	0		30
May	750	0	0		31
June	740	0	0		30
July	750	0	0		31
August	740	0	0		31
September	750	0	0		30
October	760	0	0		31
November	750	0	0		30
December	760	0	0		31
TOTAL	8980		0		

Submitted Electronically