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 # 31930
Name: BlueRidge Petroleum Corporation
Address 1: PO BOX 30545
Address 2:
City: EDMOND State: OK Zip: 73003 + 0545
Contact Person: Jonathan Allen
Phone: (580) 242-3732
Lease Name: SHAPLAND LIVING TRUST
Well Number: 3-35

API No.: 15-101-21601-00-02
Permit No: E31410.1
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SE - NW Sec. 35 Twp. 18 S. R. 28 ☐ E ☑ W
(Q/Q/Q/Q)
3479 feet from ☐ N / ☑ S Line of Section
3521 feet from ☑ E / ☐ W Line of Section
County: Lane

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: 500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	5021	0			31
February	5046	0			28
March	5543	0			31
April	5490	0			30
May	5833	0			31
June	7641	0			30
July	8074	0			31
August	1977	0			31
September	1901	0			30
October	1964	0			31
November	1921	0			30
December	5664	0			28
TOTAL	56075		0		

Submitted Electronically