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 # 31652
Name: Norstar Petroleum, Inc.
Address 1: 88 INVERNESS CIR E. UNIT F104
Address 2:
City: ENGLEWOOD State: CO Zip: 80112 + 5514
Contact Person: Brady Pfeiffer
Phone: (303) 925-0696
Lease Name: CHAPMAN A SWD (BEARCUB UNIT)
Well Number: 1-23

API No.: 15-063-21094-00-02
Permit No: D32511.0
Reporting Year: 2021
(January 1 to December 31)

____ - N2 - NW - NE Sec. 23 Twp. 15 S. R. 26 ☐ E ☑ W
(Q/Q/Q/Q)
4950 feet from ☐ N / ☑ S Line of Section
1980 feet from ☑ E / ☐ W Line of Section
County: Gove

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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	6851	0			31
February	5389	0			28
March	7285	0			31
April	7050	0			30
May	7285	0			31
June	7050	0			30
July	7285	0			31
August	7285	0			31
September	7050	0			30
October	4681	0			31
November	4530	0			30
December	3826	0			31
TOTAL	75567		0		

Submitted Electronically