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 # 30537
Name: Venture Resources, Inc.
Address 1: PO BOX 101234
Address 2:
City: DENVER State: CO Zip: 80250 + 1234
Contact Person: Manda Weien
Phone: ( 303 ) 722-2899
Lease Name: SIMPON D
Well Number: 5

API No.: 15-051-23913-00-02
Permit No: E25334.1
Reporting Year: 2021
*(January 1 to December 31)*

____ - SW - NE - NE Sec. 9 Twp. 11 S. R. 17 ☐ E ☑ W
*(Q/Q/Q/Q)*
4352 feet from ☐ N / ☑ S Line of Section
983 feet from ☑ E / ☐ W Line of Section
County: Ellis

**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: 1900 psi Injection Zone: Conglomerate
Maximum Authorized Injection Rate: 750 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 | 5418 | 1400 | 0 | 0 | 31 |
| February | 4894 | 1400 | 0 | 0 | 28 |
| March | 5418 | 1400 | 0 | 0 | 31 |
| April | 5243 | 1400 | 0 | 0 | 30 |
| May | 5268 | 1400 | 0 | 0 | 31 |
| June | 5098 | 1400 | 0 | 0 | 30 |
| July | 5268 | 1400 | 0 | 0 | 31 |
| August | 4816 | 1400 | 0 | 0 | 31 |
| September | 4661 | 1400 | 0 | 0 | 30 |
| October | 4816 | 1400 | 0 | 0 | 31 |
| November | 4457 | 1400 | 0 | 0 | 30 |
| December | 4816 | 1400 | 0 | 0 | 31 |
| ***TOTAL*** | 60173 | | 0 | | |

Submitted Electronically