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: ROY CARMICHAEL
Well Number: 10

API No.: 15-051-24387-00-03
Permit No: D30121.0
Reporting Year: 2021
(January 1 to December 31)

____ - SW - SE - SE Sec. 4 Twp. 11 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
407 feet from ☐ N / ☑ S Line of Section
941 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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 1500 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	893	0	0	0	31
February	806	0	0	0	28
March	893	0	0	0	31
April	0	0	0	0	30
May	893	0	0	0	31
June	864	0	0	0	30
July	893	0	0	0	31
August	893	0	0	0	31
September	864	0	0	0	30
October	1101	0	0	0	31
November	969	0	0	0	30
December	78	0	0	0	31
TOTAL	9147		0		

Submitted Electronically