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: HURT ELSIE
Well Number: 5

API No.: 15-195-20174-00-00
Permit No: D16080.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - NE - NW - SE Sec. 15 Twp. 12 S. R. 21 ☐ E ☑ W
*(Q/Q/Q/Q)*
2021 feet from ☐ N / ☑ S Line of Section
1468 feet from ☑ E / ☐ W Line of Section
County: Trego

**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: 400 psi Injection Zone: Cedar Hills
Maximum Authorized Injection Rate: 1000 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 | 21011 | 0 | 0 | 0 | 31 |
| February | 19691 | 0 | 0 | 0 | 28 |
| March | 22791 | 0 | 0 | 0 | 31 |
| April | 22718 | 0 | 0 | 0 | 30 |
| May | 22405 | 0 | 0 | 0 | 31 |
| June | 21916 | 0 | 0 | 0 | 30 |
| July | 23095 | 0 | 0 | 0 | 31 |
| August | 22951 | 0 | 0 | 0 | 31 |
| September | 22603 | 0 | 0 | 0 | 30 |
| October | 23838 | 0 | 0 | 0 | 31 |
| November | 22274 | 0 | 0 | 0 | 30 |
| December | 22696 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 267989 | | 0 | | |

Submitted Electronically