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 # 3519
Name: Sieg Energy, Inc.
Address 1: 726 S CEDAR ST
Address 2:
City: OTTAWA State: KS Zip: 66067 + 2908
Contact Person: M. Sieg
Phone: (785) 242-2761
Lease Name: JUDSON A
Well Number: A 2 LB

API No.: 15-059-20457-00-01
Permit No: E19318.1
Reporting Year: 2021
(January 1 to December 31)

____ - SE - SW - NE Sec. 22 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
3254 feet from ☐ N / ☑ S Line of Section
1622 feet from ☑ E / ☐ W Line of Section
County: Franklin

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 25000 mg/l Specific Gravity: ____ Additives: corrosion/bacteria
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 340 psi Injection Zone: PERU
Maximum Authorized Injection Rate: 15 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 8 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically