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 # 34350
Name: Altavista Energy, Inc.
Address 1: 4595 K-33 HIGHWAY
Address 2: PO BOX 128
City: WELLSVILLE State: KS Zip: 66092 + 0128
Contact Person: Phillip Frick
Phone: ( 785 ) 883-4057
Lease Name: OWEN
Well Number: AI-55

API No.: 15-121-30736-00-00
Permit No: E21891.12
Reporting Year: 2021
*(January 1 to December 31)*

____ - SE - NE - NW Sec. 8 Twp. 18 S. R. 22 ☑ E ☐ W
*(Q/Q/Q/Q)*
4513 feet from ☐ N / ☑ S Line of Section
3001 feet from ☑ E / ☐ W Line of Section
County: Miami

**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: 600 psi Injection Zone: Cattleman
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 11 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 860 | 600 | 0 | 0 | 31 |
| February | 524 | 600 | 0 | 0 | 14 |
| March | 996 | 600 | 0 | 0 | 25 |
| April | 1045 | 600 | 0 | 0 | 30 |
| May | 1010 | 600 | 0 | 0 | 31 |
| June | 828 | 600 | 0 | 0 | 30 |
| July | 837 | 600 | 0 | 0 | 31 |
| August | 1158 | 600 | 0 | 0 | 31 |
| September | 1034 | 600 | 0 | 0 | 30 |
| October | 1128 | 600 | 0 | 0 | 31 |
| November | 1138 | 600 | 0 | 0 | 30 |
| December | 1079 | 600 | 0 | 0 | 31 |
| ***TOTAL*** | 11637 | | 0 | | |

Submitted Electronically