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 # 34426
Name: Brickley Enterprises, LLC
Address 1: PO BOX 1118
Address 2:
City: ELDORADO State: KS Zip: 67042 + 1118
Contact Person: Andy Brickley
Phone: (316) 322-7478
Lease Name: RAY B
Well Number: 1

API No.: 15-015-20800-00-01
Permit No: E21529.1
Reporting Year: 2021
(January 1 to December 31)

____ - SW - SW - NW Sec. 34 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
3073 feet from ☐ N / ☑ S Line of Section
5033 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 700 psi Injection Zone: MISSISSIPPIAN
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	0	0			0
February	0	0			0
March	0	0			0
April	0	0			0
May	0	0			0
June	0	0			0
July	5750	700			30
August	6750	700			31
September	5500	700			30
October	5000	700			31
November	6750	700			30
December	7000	700			31
TOTAL	36750		0		

Submitted Electronically