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 # 35442
Name: Prairie Gas Operating, LLC
Address 1: 114 E. 5TH ST., SUITE 100
Address 2: PO BOX 2170
City: TULSA State: OK Zip: 74101 + 2170
Contact Person: Jim Taylor
Phone: (817) 681-7600
Lease Name: V HILL
Well Number: 1-11

API No.: 15-071-20850-00-00
Permit No: D28796.0
Reporting Year: 2021
(January 1 to December 31)

____ - SW - SW - SW Sec. 11 Twp. 19 S. R. 40 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
4950 feet from ☑ E / ☐ W Line of Section
County: Greeley

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: 300 psi Injection Zone: FORT RILEY
Maximum Authorized Injection Rate: 500 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	0	31
February	0	0	0	0	28
March	0	0	0	0	31
April	0	0	0	0	30
May	0	0	0	0	31
June	0	0	0	0	30
July	0	0	0	0	31
August	0	0	0	0	31
September	0	0	0	0	30
October	0	0	0	0	31
November	0	0	0	0	30
December	0	0	0	0	31
TOTAL	0		0		

Submitted Electronically