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 # 6484
Name: Anderson Energy, Inc.
Address 1: PO Box 781170
Address 2:
City: WICHITA State: KS Zip: 67278 + 1170
Contact Person: Bill Anderson
Phone: (316) 263-1006
Lease Name: RUMSEY
Well Number: 7

API No.: 15-051-05883-00-01
Permit No: E25686.1
Reporting Year: 2021
(January 1 to December 31)

____ - NE - SW - NW Sec. 23 Twp. 11 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
3615 feet from ☐ N / ☑ S Line of Section
4351 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 10000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	38580	0	0	0	31
February	28624	0	0	0	23
March	38580	0	0	0	31
April	37498	0	0	0	30
May	38748	0	0	0	31
June	37498	0	0	0	30
July	38748	0	0	0	31
August	38748	0	0	0	31
September	37498	0	0	0	30
October	38748	0	0	0	31
November	36248	0	0	0	29
December	28748	0	0	0	23
TOTAL	438266		0		

Submitted Electronically