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: PAGE
Well Number: 4

API No.: 15-163-02181-00-01
Permit No: E25804.1
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NW - SE Sec. 23 Twp. 10 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
2301 feet from ☐ N / ☑ S Line of Section
1768 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: Lansing Kansas City, Topeka
Maximum Authorized Injection Rate: 1000 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	1674	0	0	0	31
February	2100	0	0	0	28
March	4388	0	0	0	31
April	4526	0	0	0	30
May	4526	0	0	0	31
June	5637	0	0	0	30
July	5921	0	0	0	31
August	5921	0	0	0	31
September	5358	0	0	0	30
October	4712	0	0	0	31
November	4560	0	0	0	30
December	4070	0	0	0	25
TOTAL	53393		0		

Submitted Electronically