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 # 32325
Name: Popp Operating, Inc.
Address 1: 701 NORTH MAIN
Address 2: PO BOX 187
City: HOISINGTON State: KS Zip: 67544 + 0187
Contact Person: RICKEY POPP
Phone: (620) 786-5514
Lease Name: WAGNER UNIT
Well Number: 1

API No.: 15-165-22153-01-00
Permit No: E32544.1
Reporting Year: 2022
(January 1 to December 31)

____ - NW - NE - NE Sec. 29 Twp. 18 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
410 feet from ☑ N / ☐ S Line of Section
1246 feet from ☑ E / ☐ W Line of Section
County: Rush

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: REAGAN
Maximum Authorized Injection Rate: 16000 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	69316	550	0	0	31
February	62020	550	0	0	28
March	74433	550	0	0	31
April	77482	550	0	0	30
May	80334	550	0	0	31
June	83648	550	0	0	30
July	86211	550	0	0	31
August	69475	550	0	0	31
September	1238	350	0	0	30
October	1302	350	0	0	31
November	1266	350	0	0	30
December	1331	350	0	0	31
TOTAL	608056		0		

Submitted Electronically