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 # 35523
Name: 3G Production, LLC
Address 1: 10387 NE SR 61
Address 2: PO BOX 847
City: PRATT State: KS Zip: 67124 + 0847
Contact Person: Kenneth C Gates
Phone: ( 620 ) 672-2531
Lease Name: PACKARD
Well Number: 1

API No.: 15-007-21316-00-01
Permit No: D31955.0
Reporting Year: 2022
*(January 1 to December 31)*

____ - S2 - SW - SW Sec. 24 Twp. 31 S. R. 13 ☐ E ☑ W
*(Q/Q/Q/Q)*
345 feet from ☐ N / ☑ S Line of Section
4444 feet from ☑ E / ☐ W Line of Section
County: Barber

**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: 500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 2500 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 | 46 | 0 | 0 | 0 | 23 |
| February | 40 | 0 | 0 | 0 | 20 |
| March | 46 | 0 | 0 | 0 | 23 |
| April | 44 | 0 | 0 | 0 | 22 |
| May | 46 | 0 | 0 | 0 | 23 |
| June | 44 | 0 | 0 | 0 | 22 |
| July | 46 | 0 | 0 | 0 | 23 |
| August | 46 | 0 | 0 | 0 | 23 |
| September | 44 | 0 | 0 | 0 | 22 |
| October | 46 | 0 | 0 | 0 | 23 |
| November | 44 | 0 | 0 | 0 | 22 |
| December | 46 | 0 | 0 | 0 | 23 |
| ***TOTAL*** | 538 | | 0 | | |

Submitted Electronically