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 # 33245
Name: Cross Bar Energy, LLC
Address 1: 1700 N. WATERFRONT PKWY BLDG 300, STE A
Address 2:
City: WICHITA State: KS Zip: 67206 + 6614
Contact Person: ANDREW BRENSING
Phone: ( 316 ) 239-6151
Lease Name: NORTH EDWARDS
Well Number: AE W-2

API No.: 15-073-23704-00-01
Permit No: E26535.1
Reporting Year: 2022
*(January 1 to December 31)*

____ - SW - SE - NW Sec. 7 Twp. 23 S. R. 11 ☑ E ☐ W
*(Q/Q/Q/Q)*
3052 feet from ☐ N / ☑ S Line of Section
3515 feet from ☑ E / ☐ W Line of Section
County: Greenwood

**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: 1000 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 400 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 | 3557 | 420 | 0 | | 31 |
| February | 3213 | 420 | 0 | | 28 |
| March | 3557 | 420 | 0 | | 31 |
| April | 3442 | 420 | 0 | | 30 |
| May | 3557 | 420 | 0 | | 31 |
| June | 3442 | 420 | 0 | | 30 |
| July | 3557 | 420 | 0 | | 31 |
| August | 3557 | 420 | 0 | | 31 |
| September | 3442 | 420 | 0 | | 30 |
| October | 3557 | 420 | 0 | | 31 |
| November | 3442 | 420 | 0 | | 30 |
| December | 3557 | 420 | 0 | | 31 |
| ***TOTAL*** | 41880 | | 0 | | |

Submitted Electronically