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 # 5104
Name: Blue Goose Drilling Company, Inc.
Address 1: PO BOX 1413
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 1413
Contact Person: Martin Miller
Phone: ( 620 ) 792-5633
Lease Name: BORELL
Well Number: 1

API No.: 15-101-20573-00-01
Permit No: D24603.0
Reporting Year: 2022
*(January 1 to December 31)*

____ - NE - NW - SE Sec. 9 Twp. 18 S. R. 27 ☐ E ☑ W
*(Q/Q/Q/Q)*
2306 feet from ☐ N / ☑ S Line of Section
1621 feet from ☑ E / ☐ W Line of Section
County: Lane

**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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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 | 680 | 0 | 0 | 0 | 31 |
| February | 660 | 0 | 0 | 0 | 28 |
| March | 690 | 0 | 0 | 0 | 31 |
| April | 710 | 0 | 0 | 0 | 30 |
| May | 740 | 0 | 0 | 0 | 31 |
| June | 730 | 0 | 0 | 0 | 30 |
| July | 770 | 0 | 0 | 0 | 31 |
| August | 770 | 0 | 0 | 0 | 31 |
| September | 750 | 0 | 0 | 0 | 30 |
| October | 760 | 0 | 0 | 0 | 31 |
| November | 750 | 0 | 0 | 0 | 30 |
| December | 770 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 8780 | | 0 | | |

Submitted Electronically