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: WEYAND
Well Number: 1

API No.: 15-193-20511-00-03
Permit No: E27295.1
Reporting Year: 2022
(January 1 to December 31)

____ - SE - SE - NW Sec. 28 Twp. 8 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
2982 feet from ☐ N / ☑ S Line of Section
3067 feet from ☑ E / ☐ W Line of Section
County: Thomas

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: 300 psi Injection Zone: Lansing Kansas City
Maximum Authorized Injection Rate: 500 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	2104	0	0	0	31
February	2634	0	0	0	28
March	3326	0	0	0	31
April	3088	0	0	0	30
May	2567	0	0	0	23
June	2632	0	0	0	28
July	2772	0	0	0	31
August	3296	0	0	0	29
September	3143	0	0	0	30
October	2524	0	0	0	31
November	2352	0	0	0	30
December	983	0	0	0	10
TOTAL	31421		0		

Submitted Electronically