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 # 3449
Name: Coen Energy Corporation
Address 1: 11217 W 140TH PL
Address 2:
City: OVERLAND PARK State: KS Zip: 66221 + 8019
Contact Person: David Coen
Phone: ( 913 ) 515-8622
Lease Name: MECKE
Well Number: 6-2016

API No.: 15-107-25184-00-01
Permit No: E29077.2
Reporting Year: 2022
*(January 1 to December 31)*

____ - SW - NE - SE Sec. 17 Twp. 23 S. R. 22 ☑ E ☐ W
*(Q/Q/Q/Q)*
1485 feet from ☐ N / ☑ S Line of Section
751 feet from ☑ E / ☐ W Line of Section
County: Linn

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 20000mg/l mg/l Specific Gravity: ____ Additives: ____
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 550 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 19 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 750 | 450 | 0 | 0 | 31 |
| February | 750 | 450 | 0 | 0 | 28 |
| March | 750 | 450 | 0 | 0 | 31 |
| April | 750 | 450 | 0 | 0 | 30 |
| May | 750 | 450 | 0 | 0 | 31 |
| June | 750 | 450 | 0 | 0 | 30 |
| July | 750 | 450 | 0 | 0 | 31 |
| August | 750 | 450 | 0 | 0 | 31 |
| September | 750 | 450 | 0 | 0 | 30 |
| October | 750 | 450 | 0 | 0 | 31 |
| November | 750 | 450 | 0 | 0 | 30 |
| December | 750 | 450 | 0 | 0 | 31 |
| ***TOTAL*** | 9000 | | 0 | | |

Submitted Electronically