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 # 34426
Name: Brickley Enterprises, LLC
Address 1: PO BOX 1118
Address 2:
City: ELDORADO State: KS Zip: 67042 + 1118
Contact Person: Andy Brickley
Phone: (316) 322-7478
Lease Name: MANNING
Well Number: 2A

API No.: 15-015-22621-00-00
Permit No: D23791.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - SW - SW Sec. 5 Twp. 26 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
1014 feet from ☐ N / ☑ S Line of Section
4415 feet from ☑ E / ☐ W Line of Section
County: Butler

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: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	0				0
February	0				0
March	0				0
April	0				0
May	0				0
June	750	0			15
July	950	0			25
August	750	0			31
September	700	0			20
October	1000	0			31
November	300	0			25
December	0	0			0
TOTAL	4450		0		

Submitted Electronically