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 # 35513
Name: Fossil Creek Energy, LLC
Address 1: PO BOX 915
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0915
Contact Person: Gavin Ramsay
Phone: ( 785 ) 310-9799
Lease Name: J BOXBERGER
Well Number: 3

API No.: 15-167-07020-00-01
Permit No: E13980.2
Reporting Year: 2023
*(January 1 to December 31)*

SE - SW - SE - NE Sec. 26 Twp. 14 S. R. 14 ☐ E ☑ W
*(Q/Q/Q/Q)*
2965 feet from ☐ N / ☑ S Line of Section
703 feet from ☑ E / ☐ W Line of Section
County: Russell

**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: Tarkio
Maximum Authorized Injection Rate: 1000 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 | 7498 | 500 | 0 | 0 | 31 |
| February | 6135 | 540 | 0 | 0 | 28 |
| March | 7102 | 560 | 0 | 0 | 31 |
| April | 6653 | 540 | 0 | 0 | 30 |
| May | 6680 | 560 | 0 | 0 | 30 |
| June | 6836 | 580 | 0 | 0 | 30 |
| July | 7072 | 560 | 0 | 0 | 31 |
| August | 7369 | 600 | 0 | 0 | 31 |
| September | 6443 | 600 | 0 | 0 | 28 |
| October | 6919 | 600 | 0 | 0 | 31 |
| November | 6324 | 600 | 0 | 0 | 30 |
| December | 6190 | 600 | 0 | 0 | 31 |
| ***TOTAL*** | 81221 | | 0 | | |

Submitted Electronically