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: E MILLER D
Well Number: 52-30

API No.: 15-167-22683-00-01
Permit No: E23659.8
Reporting Year: 2023
*(January 1 to December 31)*

____ - NE - NW - SW Sec. 30 Twp. 14 S. R. 13 ☐ E ☑ W
*(Q/Q/Q/Q)*
2342 feet from ☐ N / ☑ S Line of Section
4184 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: 1500 psi Injection Zone: Lansing-Kansas City
Maximum Authorized Injection Rate: 2300 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 | 6982 | 60 | 0 | 0 | 31 |
| February | 7944 | 200 | 0 | 0 | 28 |
| March | 7077 | 180 | 0 | 0 | 29 |
| April | 8082 | 200 | 0 | 0 | 29 |
| May | 8827 | 220 | 0 | 0 | 31 |
| June | 8764 | 240 | 0 | 0 | 30 |
| July | 8979 | 260 | 0 | 0 | 31 |
| August | 8289 | 220 | 0 | 0 | 30 |
| September | 9789 | 0 | 0 | 0 | 30 |
| October | 9736 | 0 | 0 | 0 | 31 |
| November | 8680 | 0 | 0 | 0 | 30 |
| December | 8337 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 101486 | | 0 | | |

Submitted Electronically