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 # 6009
Name: Double Eagle Exploration, Inc.
Address 1: 111 MAIN STREET
Address 2: PO BOX 214
City: LARNED State: KS Zip: 67550 + 0214
Contact Person: Harold Bellerive
Phone: (785) 635-4531
Lease Name: HLAD B
Well Number: 2

API No.: 15-167-23579-00-00
Permit No: D30463.0
Reporting Year: 2023
(January 1 to December 31)

____ - NW - SE - SE Sec. 17 Twp. 14 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
1065 feet from ☐ N / ☑ S Line of Section
990 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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 300 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	1488	0	0		31
February	1344	0	0		28
March	1488	0	0		31
April	1440	0	0		30
May	1488	0	0		31
June	1440	0	0		30
July	1488	0	0		31
August	1488	0	0		31
September	1440	0	0		30
October	1488	0	0		31
November	1440	0	0		30
December	1488	0	0		31
TOTAL	17520		0		

Submitted Electronically