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 # 31788
Name: Veenker Resources, Inc.
Address 1: PO BOX 14339
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73113 + 0339
Contact Person: Kim Kirkes
Phone: (405) 751-1414
Lease Name: MEDCALF
Well Number: 23

API No.: 15-011-22262-00-01
Permit No: E24503.8
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NE - NW Sec. 7 Twp. 24 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4256 feet from ☐ N / ☑ S Line of Section
3467 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 550 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 50 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	720	300			31
February	700	300			28
March	720	300			31
April	720	300			30
May	720	300			31
June	720	300			30
July	720	300			31
August	700	300			30
September	700	300			26
October	720	300			31
November	720	300			30
December	700	300			31
TOTAL	8560		0		

Submitted Electronically