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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N. BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Paula White
Phone: (316) 265-3311
Lease Name: WALKER UNIT (VERNADENE LEASE)
Well Number: 6-29 (1-29)

API No.: 15-055-21149-00-01
Permit No: E34163.3
Reporting Year: 2023
(January 1 to December 31)

____ - N2 - NE - SW Sec. 29 Twp. 23 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
3300 feet from ☑ E / ☐ W Line of Section
County: Finney

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1200 psi Injection Zone: St. Louis
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 6 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	8641	0	0	0	31
February	7861	0	0	0	28
March	8965	0	0	0	29
April	7896	0	0	0	30
May	7367	0	0	0	31
June	6436	0	0	0	30
July	7974	0	0	0	31
August	8024	0	0	0	31
September	9613	0	0	0	30
October	11040	0	0	0	31
November	9533	0	0	0	30
December	10000	0	0	0	31
TOTAL	103350		0		

Submitted Electronically