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: NOLLETTE
Well Number: #9-15

API No.: 15-193-21062-00-00
Permit No: D32949.0
Reporting Year: 2023
(January 1 to December 31)

____ - ____ - NE - SW Sec. 15 Twp. 10 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
2569 feet from ☐ N / ☑ S Line of Section
2673 feet from ☑ E / ☐ W Line of Section
County: Thomas

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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 5000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	27196	0	0	0	31
February	21601	0	0	0	28
March	27293	0	0	0	31
April	25604	0	0	0	30
May	28210	0	0	0	31
June	25847	0	0	0	30
July	32723	0	0	0	31
August	30445	0	0	0	31
September	26673	0	0	0	30
October	32380	0	0	0	31
November	42606	0	0	0	30
December	38158	0	0	0	31
TOTAL	358736		0		

Submitted Electronically