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 # 35639
Name: Daylight Petroleum, LLC
Address 1: PO BOX 52070
Address 2:
City: HOUSTON State: TX Zip: 77027 + 2952
Contact Person: Jennifer Peters
Phone: ( 620 ) 754-3620
Lease Name: RENN
Well Number: LO-SWD-1

API No.: 15-205-28453-00-00
Permit No: D32728.0
Reporting Year: 2023
*(January 1 to December 31)*

____ - SE - NW - NE Sec. 21 Twp. 30 S. R. 16 ☑ E ☐ W
*(Q/Q/Q/Q)*
4399 feet from ☐ N / ☑ S Line of Section
1776 feet from ☑ E / ☐ W Line of Section
County: Wilson

**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: 500 psi Injection Zone: UNKNOWN
Maximum Authorized Injection Rate: 500 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 | 58 | 50 | 0 | 0 | 2 |
| February | 23 | 50 | 0 | 0 | 1 |
| March | 177 | 50 | 0 | 0 | 6 |
| April | 0 | 0 | 0 | 0 | 0 |
| May | 0 | 0 | 0 | 0 | 0 |
| June | 0 | 0 | 0 | 0 | 0 |
| July | 0 | 0 | 0 | 0 | 0 |
| August | 0 | 0 | 0 | 0 | 0 |
| September | 0 | 0 | 0 | 0 | 0 |
| October | 0 | 0 | 0 | 0 | 0 |
| November | 0 | 0 | 0 | 0 | 0 |
| December | 0 | 0 | 0 | 0 | 0 |
| ***TOTAL*** | 258 | | 0 | | |

Submitted Electronically