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 # 35831
Name: EPOC, LLC
Address 1: 313 E AARON DR
Address 2:
City: ANDOVER State: KS Zip: 67002 + 8649
Contact Person: Ray Gilbert
Phone: (620) 820-9687
Lease Name: T. WIEBE
Well Number: 31-1 SWD

API No.: 15-015-24118-00-00
Permit No: D32769.0
Reporting Year: 2023
(January 1 to December 31)

NW - NE - NE - NE Sec. 31 Twp. 23 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
5160 feet from ☐ N / ☑ S Line of Section
540 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 250 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 10000 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	49350	0			31
February	42650	0			28
March	51265	0			31
April	45230	0			30
May	44650	0			31
June	42650	0			30
July	45230	0			31
August	45230	0			31
September	42650	0			30
October	45230	0			31
November	42650	0			30
December	45230	0			31
TOTAL	542015		0		

Submitted Electronically