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 # 30481
Name: Apollo Energies, Inc.
Address 1: 10378 N 281 HWY
Address 2:
City: PRATT State: KS Zip: 67124 + 7920
Contact Person: Kevin Fischer
Phone: (620) 672-9001
Lease Name: L M NORRIS
Well Number: 1

API No.: 15-047-10093-00-01
Permit No: D10343.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - SE - SW Sec. 22 Twp. 25 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
345 feet from ☐ N / ☑ S Line of Section
2971 feet from ☑ E / ☐ W Line of Section
County: Edwards

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: 200 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 300 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	3450	0			23
February	4200	0			28
March	4650	0			31
April	4500	0			30
May	3410	0			31
June	3300	0			30
July	3410	0			31
August	3410	0			31
September	3300	0			30
October	3410	0			31
November	3300	0			30
December	3410	0			31
TOTAL	43750		0		

Submitted Electronically