

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 # 35104
Name: Burch, Bill dba B and B Oil Company
Address 1: 287 K-19 HWY
Address 2: _____
City: BELPRE State: KS Zip: 67519 + 2007
Contact Person: Bill Burch
Phone: (620) 804-2973
Lease Name: ROMERSI - SWDW
Well Number: 1-30

API No.: 15-047-20387-00-02
Permit No.: D28156.0
Reporting Year: 2023
(January 1 to December 31)
NW - SE - NE - SE Sec. 30 Twp. 25 S. R. 18 ☐ E ☒ W
(a/a/a/a)
1953 feet from ☐ N / ☒ S Line of Section
483 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: 0 psi Injection Zone: CEDAR HILLS
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	<u>0</u>	<u>0</u>			<u>0</u>
	February	<u>728</u>	<u>0</u>			<u>14</u>
	March	<u>0</u>	<u>0</u>			<u>0</u>
	April	<u>0</u>	<u>0</u>			<u>0</u>
	May	<u>0</u>	<u>0</u>			<u>0</u>
	June	<u>0</u>	<u>0</u>			<u>0</u>
	July	<u>0</u>	<u>0</u>			<u>0</u>
	August	<u>0</u>	<u>0</u>			<u>0</u>
	September	<u>572</u>	<u>0</u>			<u>11</u>
	October	<u>1040</u>	<u>0</u>			<u>20</u>
	November	<u>1248</u>	<u>0</u>			<u>24</u>
	December	<u>1352</u>	<u>0</u>			<u>26</u>
	TOTAL	<u>4940</u>		<u>0</u>		

Submitted Electronically