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 # 35820
Name: Thresher Energy, Inc.
Address 1: 2 NORTHPOINT DRIVE STE 800
Address 2:
City: HOUSTON State: TX Zip: 77060 + 3237
Contact Person: Ray Dorothy
Phone: (713) 993-0774
Lease Name: DRIFT UNIT
Well Number: 27

API No.: 15-153-20855-00-01
Permit No: E27992.5
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NE - SW Sec. 16 Twp. 1 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
1813 feet from ☐ N / ☑ S Line of Section
3665 feet from ☑ E / ☐ W Line of Section
County: Rawlins

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: 1500 psi Injection Zone: LANSING C,LANSING D,LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 1500 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	0		0		31
February	0		0		28
March	0		0		31
April	0		0		30
May	0		0		31
June	0		0		30
July	0		0		31
August	0		0		30
September	0		0		30
October	0		0		31
November	0		0		30
December	0		0		31
TOTAL	0		0		

Submitted Electronically