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 # 33306
Name: Blake Exploration, LLC
Address 1: 201 S MAIN
Address 2: PO BOX 150
City: BOGUE State: KS Zip: 67625 + 0150
Contact Person: Mike Davignon
Phone: (785) 341-8804
Lease Name: TREXLER OWWO
Well Number: 3

API No.: 15-065-22214-00-02
Permit No: D25274.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - NW - SE Sec. 1 Twp. 7 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
1720 feet from ☐ N / ☑ S Line of Section
1760 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 1500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0				
February	0				
March	0				
April	135	0			1
May	0				
June	0				
July	0				
August	0				
September	121	0			2
October	0				
November	0				
December	0				
TOTAL	256		0		

Submitted Electronically