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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 # 35513
Name: Fossil Creek Energy, LLC
Address 1: PO BOX 915
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0915
Contact Person: Gavin Ramsay
Phone: (785) 310-9799
Lease Name: G MILLER D
Well Number: 47-31

API No.: 15-167-22773-00-01
Permit No: E23659.7
Reporting Year: 2024
(January 1 to December 31)

____ - SW - SE - NE Sec. 31 Twp. 14 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
3154 feet from ☐ N / ☑ S Line of Section
1136 feet from ☑ E / ☐ W Line of Section
County: Russell

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: Gorham
Maximum Authorized Injection Rate: 2300 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	25820	260	0	0	27
February	51922	200	0	0	29
March	53289	180	0	0	31
April	53774	180	0	0	30
May	56136	300	0	0	31
June	53379	240	0	0	30
July	37510	200	0	0	31
August	29481	240	0	0	29
September	37583	220	0	0	30
October	45012	200	0	0	29
November	40842	220	0	0	28
December	25273	150	0	0	31
TOTAL	510021		0		

Submitted Electronically