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 # 35722
Name: RH Capital-Beets, LLC
Address 1: 1133 CORNETT BRANCH RD
Address 2:
City: LAKE OZARK State: MO Zip: 65049 + 4817
Contact Person: Thomas Heckman
Phone: (816) 651-5248
Lease Name: GRAY
Well Number: 8

API No.: 15-133-20924-00-00
Permit No: E19664.73
Reporting Year: 2024
(January 1 to December 31)

____ - NW - NE - SE Sec. 34 Twp. 30 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
2544 feet from ☐ N / ☑ S Line of Section
818 feet from ☑ E / ☐ W Line of Section
County: Neosho

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: None
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 250 psi Injection Zone: Skinner Sand
Maximum Authorized Injection Rate: 4000 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	52	150	0	0	31
February	77	150	0	0	28
March	30	150	0	0	31
April	34	150	0	0	30
May	43	150	0	0	31
June	34	150	0	0	30
July	34	150	0	0	31
August	47	150	0	0	31
September	34	150	0	0	30
October	47	150	0	0	31
November	56	150	0	0	30
December	47	150	0	0	31
TOTAL	535		0		

Submitted Electronically