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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Paula White
Phone: ( 316 ) 265-3311
Lease Name: LEBOW UNIT
Well Number: 6X

API No.: 15-167-01706-00-02
Permit No: E28393.2
Reporting Year: 2024
*(January 1 to December 31)*

____ - ____ - SW - NE Sec. 9 Twp. 11 S. R. 15 ☐ E ☑ W
*(Q/Q/Q/Q)*
2958 feet from ☐ N / ☑ S Line of Section
2282 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: 0 mg/l Specific Gravity: _____ Additives: _____
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 800 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 750 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 8370 | 0 | 0 | 0 | 31 |
| February | 7540 | 0 | 0 | 0 | 29 |
| March | 8680 | 0 | 0 | 0 | 31 |
| April | 8100 | 0 | 0 | 0 | 30 |
| May | 8215 | 0 | 0 | 0 | 31 |
| June | 7950 | 0 | 0 | 0 | 30 |
| July | 8835 | 0 | 0 | 0 | 31 |
| August | 8680 | 0 | 0 | 0 | 31 |
| September | 8400 | 0 | 0 | 0 | 30 |
| October | 9300 | 0 | 0 | 0 | 31 |
| November | 9000 | 0 | 0 | 0 | 30 |
| December | 9920 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 102990 | | 0 | | |

Submitted Electronically