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: ROBBINS
Well Number: 1-34A

API No.: 15-097-30164-00-02
Permit No: D17232.0
Reporting Year: 2024
(January 1 to December 31)

____ - ____ - SE - SE Sec. 34 Twp. 30 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
636 feet from ☐ N / ☑ S Line of Section
648 feet from ☑ E / ☐ W Line of Section
County: Kiowa

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: 250 psi Injection Zone: Permian
Maximum Authorized Injection Rate: 700 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	6103	0	0	0	31
February	6173	0	0	0	29
March	6417	0	0	0	31
April	6430	0	0	0	30
May	6107	0	0	0	31
June	5890	0	0	0	30
July	7329	0	0	0	31
August	3914	0	0	0	31
September	7994	0	0	0	30
October	7814	0	0	0	31
November	7280	0	0	0	30
December	6854	0	0	0	31
TOTAL	78305		0		

Submitted Electronically