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: BOXBERGER
Well Number: W-1

API No.: 15-167-20388-00-01
Permit No: E15415.1
Reporting Year: 2024
(January 1 to December 31)

____ - SW - SW - NE Sec. 15 Twp. 14 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
2674 feet from ☐ N / ☑ S Line of Section
2569 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: 1100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	14941	320	0	0	31
February	13985	320	0	0	29
March	14439	320	0	0	31
April	13685	320	0	0	30
May	14410	320	0	0	31
June	12183	320	0	0	30
July	9635	320	0	0	31
August	9743	320	0	0	31
September	8939	320	0	0	30
October	10758	320	0	0	31
November	5676	320	0	0	30
December	2541	320	0	0	31
TOTAL	130935		0		

Submitted Electronically