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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 # 30481
Name: Apollo Energies, Inc.
Address 1: 10378 N 281 HWY
Address 2:
City: PRATT State: KS Zip: 67124 + 7920
Contact Person: Kevin Fischer
Phone: (620) 672-9001
Lease Name: BREHM
Well Number: 1

API No.: 15-151-05148-00-01
Permit No: D15798.0
Reporting Year: 2024
(January 1 to December 31)

____ - NE - NE - SW Sec. 30 Twp. 28 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
2320 feet from ☐ N / ☑ S Line of Section
2990 feet from ☑ E / ☐ W Line of Section
County: Pratt

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: 500 psi Injection Zone: ARBUCKLE,KANSAS CITY
Maximum Authorized Injection Rate: 500 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	3750	300			25
February	4200	300			28
March	4650	300			31
April	3750	300			25
May	4500	300			30
June	4500	300			30
July	4650	300			31
August	4650	300			31
September	4500	300			30
October	4650	300			31
November	4500	300			30
December	4650	300			31
TOTAL	52950		0		

Submitted Electronically