

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 # 5030

Name: Vess Oil Corporation

Address 1: 1700 N WATERFRONT PKWY BLDG 500

Address 2: _____

City: WICHITA State: KS Zip: 67206 + 6619

Contact Person: Michelle Henning

Phone: (316) 682-1537

Lease Name: CHESNEY

Well Number: 3

API No.: 15-051-30640-00-01

Permit No.: D14638.0

Reporting Year: 2024
(January 1 to December 31)

E2 - W2 - SW - SW Sec. 17 Twp. 11 S. R. 16 ☐ E ☒ W
(a/a/a/a)

742 feet from ☐ N / ☒ S Line of Section

4780 feet from ☒ E / ☐ W Line of Section

County: Ellis

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

Maximum Authorized Injection Rate: 3000 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	<u>15407</u>	_____	_____	_____	<u>31</u>
	February	<u>14094</u>	_____	_____	_____	<u>29</u>
	March	<u>15066</u>	_____	_____	_____	<u>31</u>
	April	<u>14580</u>	_____	_____	_____	<u>30</u>
	May	<u>15066</u>	_____	_____	_____	<u>31</u>
	June	<u>14580</u>	_____	_____	_____	<u>30</u>
	July	<u>15066</u>	_____	_____	_____	<u>31</u>
	August	<u>15066</u>	_____	_____	_____	<u>31</u>
	September	<u>15825</u>	_____	_____	_____	<u>30</u>
	October	<u>20630</u>	_____	_____	_____	<u>31</u>
	November	<u>19084</u>	_____	_____	_____	<u>30</u>
	December	<u>20492</u>	_____	_____	_____	<u>31</u>
	TOTAL	<u>194956</u>	_____	<u>0</u>	_____	_____

Submitted Electronically

Summary of Changes

Lease Name and Number: CHESNEY 3

New Doc ID: 1825845

Parent Doc ID: 1825842

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	02/19/2025	02/20/2025
Flagged	No	Yes
Total BBL Injected	77505	194956
Total BBL Injected in April	6570	14580
Total BBL Injected in August	6386	15066
Total BBL Injected in December	6386	20492
Total BBL Injected in February	6351	14094
Total BBL Injected in January	6519	15407
Total BBL Injected in July	6386	15066
Total BBL Injected in June	6180	14580
Total BBL Injected in March	6789	15066

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total BBL Injected in May	6789	15066
Total BBL Injected in November	6180	19084
Total BBL Injected in October	6789	20630
Total BBL Injected in September	6180	15825