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 # 35962
Name: Monarch Energy LLC
Address 1: 1003 HIDDEN MEADOWS DR
Address 2:
City: PAOLA State: KS Zip: 66071 + 7517
Contact Person: BrianKing
Phone: (832) 834-0095
Lease Name: CAMAC
Well Number: 1

API No.: 15-011-20311-00-01
Permit No: E26443.1
Reporting Year: 2024
(January 1 to December 31)

____ - NW - NW - NW Sec. 35 Twp. 24 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
5105 feet from ☐ N / ☑ S Line of Section
4650 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 285 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 20 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	25				31
February	25				28
March	30				31
April	30				30
May	35				31
June	30				30
July	35				31
August	35				31
September	35				30
October	35				31
November	30				30
December	30				31
TOTAL	375		0		

Submitted Electronically