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: PRATHER
Well Number: 2

API No.: 15-095-19033-00-01
Permit No: D20508.0
Reporting Year: 2024
(January 1 to December 31)

____ - NE - SW - NW Sec. 18 Twp. 28 S. R. 7 ☐ E ☑ W
(Q/Q/Q/Q)
3630 feet from ☐ N / ☑ S Line of Section
4290 feet from ☑ E / ☐ W Line of Section
County: Kingman

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: 150 psi Injection Zone: FORT RILEY
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	3250				31
February	3640				29
March	4031				31
April	3770				30
May	3645				31
June	690				8
July	659				25
August	4030				31
September	3380				30
October	3770				31
November	3770				30
December	2998				31
TOTAL	37633		0		

Submitted Electronically