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 # 5610
Name: Bruce Oil Company, L.L.C.
Address 1: 1704 LIMESTONE RD
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 6500
Contact Person: Levi Koehn
Phone: (620) 241-2938
Lease Name: TAGUE
Well Number: 7

API No.: 15-015-20860-00-01
Permit No: D19016.0
Reporting Year: 2024
(January 1 to December 31)

____ - SE - SE - NE Sec. 13 Twp. 26 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
3189 feet from ☐ N / ☑ S Line of Section
265 feet from ☑ E / ☐ W Line of Section
County: Butler

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: 0
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 400 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	11225	0	0	0	31
February	11225	0	0	0	28
March	11225	0	0	0	31
April	11225	0	0	0	30
May	11225	0	0	0	31
June	11225	0	0	0	30
July	11225	0	0	0	31
August	11225	0	0	0	31
September	11225	0	0	0	30
October	11225	0	0	0	31
November	11225	0	0	0	30
December	11225	0	0	0	31
TOTAL	134700		0		

Submitted Electronically