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 # 35801
Name: Sommer Oil LLC
Address 1: 228 W COCHRAN ST
Address 2:
City: GREELEY State: KS Zip: 66033 + 9779
Contact Person: Brian Sommer
Phone: (785) 304-2451
Lease Name: BRANTON
Well Number: 1-I

API No.: 15-003-26008-00-00
Permit No: E23808.2
Reporting Year: 2024
(January 1 to December 31)

____ - NW - SE - NE Sec. 21 Twp. 20 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
3662 feet from ☐ N / ☑ S Line of Section
1098 feet from ☑ E / ☐ W Line of Section
County: Anderson

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: 550 psi Injection Zone: squirrel
Maximum Authorized Injection Rate: 100 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	750	450	0	0	31
February	800	450	0	0	29
March	750	450	0	0	31
April	800	450	0	0	30
May	775	450	0	0	31
June	700	450	0	0	30
July	825	450	0	0	31
August	775	450	0	0	31
September	750	450	0	0	30
October	700	450	0	0	31
November	650	450	0	0	30
December	700	450	0	0	31
TOTAL	8975		0		

Submitted Electronically