

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 # 35104

Name: Burch, Bill dba B and B Oil Company

Address 1: 287 K-19 HWY

Address 2: _____

City: BELPRE State: KS Zip: 67519 + 2007

Contact Person: Bill Burch

Phone: (620) 804-2973

Lease Name: ROMERSI - SWDW

Well Number: 1-30

API No.: 15-047-20387-00-02

Permit No: D28156.0

Reporting Year: 2024
(January 1 to December 31)

NW - SE - NE - SE Sec. 30 Twp. 25 S. R. 18 ☐ E ☒ W
(a/a/a/a)

1953 feet from ☐ N / ☒ S Line of Section

483 feet from ☒ E / ☐ W Line of Section

County: Edwards

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: 0 psi Injection Zone: CEDAR HILLS

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	<u>0</u>	<u>0</u>			<u>0</u>
	February	<u>0</u>	<u>0</u>			<u>0</u>
	March	<u>0</u>	<u>0</u>			<u>0</u>
	April	<u>660</u>	<u>0</u>			<u>11</u>
	May	<u>1380</u>	<u>0</u>			<u>23</u>
	June	<u>1260</u>	<u>0</u>			<u>21</u>
	July	<u>840</u>	<u>0</u>			<u>14</u>
	August	<u>0</u>	<u>0</u>			<u>0</u>
	September	<u>0</u>	<u>0</u>			<u>0</u>
	October	<u>0</u>	<u>0</u>			<u>0</u>
	November	<u>1260</u>	<u>0</u>			<u>21</u>
	December	<u>240</u>	<u>0</u>			<u>4</u>
	TOTAL	<u>5640</u>		<u>0</u>		

Submitted Electronically