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 # 33593
Name: Barracuda Operating Company
Address 1: PO BOX 405
Address 2:
City: NESS CITY State: KS Zip: 67560 + 0405
Contact Person: BRIAN GABEL
Phone: (785) 798-3122
Lease Name: MISHLER M
Well Number: 1-SWD

API No.: 15-135-22890-00-01
Permit No: D24286.0
Reporting Year: 2024
(January 1 to December 31)

____ - SE - NW - SW Sec. 32 Twp. 16 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
1648 feet from ☐ N / ☑ S Line of Section
4283 feet from ☑ E / ☐ W Line of Section
County: Ness

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: MISSISSIPPIAN
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	2190				31
February	3070				29
March	3835				31
April	3046				30
May	2970				31
June	1900				30
July	2510				31
August	2970				31
September	2240				30
October	1930				31
November	610				30
December	520				31
TOTAL	27791		0		

Submitted Electronically