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 # 34357
Name: Atlas Operating LLC
Address 1: 1900 ST JAMES PLACE SUITE 800
Address 2:
City: HOUSTON State: TX Zip: 77056 + 4133
Contact Person: Kris Waneck
Phone: (281) 893-9400
Lease Name: CYPRESS
Well Number: 1

API No.: 15-095-22241-00-01
Permit No: D31119.0
Reporting Year: 2024
(January 1 to December 31)

E2 - SE - SW - SE Sec. 30 Twp. 29 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
1420 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: 690 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 5500 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	0	0	0	0	31
February	120	0	0	0	29
March	0	0	0	0	31
April	0	0	0	0	30
May	0	0	0	0	31
June	0	0	0	0	30
July	0	0	0	0	31
August	0	0	0	0	31
September	0	0	0	0	30
October	240	0	0	0	31
November	0	0	0	0	30
December	120	0	0	0	31
TOTAL	480		0		

Submitted Electronically