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 # 34817
Name: HB Energy LLC
Address 1: 3137 VIRGINIA RD
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 9103
Contact Person: Clay Hughes
Phone: (785) 979-9493
Lease Name: GORDON
Well Number: 6 A

API No.: 15-091-22042-00-00
Permit No: E24777.6
Reporting Year: 2025
(January 1 to December 31)

____ - SW - NE - NE Sec. 30 Twp. 14 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4346 feet from ☐ N / ☑ S Line of Section
935 feet from ☑ E / ☐ W Line of Section
County: Johnson

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: 650 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 200 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	505	300			31
February	605	300			28
March	665	300			31
April	644	300			30
May	688	300			31
June	691	300			30
July	688	300			31
August	645	300			31
September	694	300			30
October	685	300			31
November	695	300			30
December	675	300			31
TOTAL	7880		0		

Submitted Electronically