

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 # 35998
Name: Vesa Enterprises LLC
Address 1: 3723 South Redwood Drive
Address 2: _____
City: BROKEN ARROW State: OKLAHOMA Zip: 74011 + 3837
Contact Person: Gary Van Pratt
Phone: (918) 949-8091
Lease Name: RISING A
Well Number: 10

API No.: 15-019-25916-00-01
Permit No: E26605.1
Reporting Year: 2025
(January 1 to December 31)
NW - NE - NE - SW Sec. 1 Twp. 34 S. R. 12 ☒ E ☐ W
(a/a/a/a)
2429 feet from ☐ N / ☒ S Line of Section
3282 feet from ☒ E / ☐ W Line of Section
County: Chautauqua

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: 300 psi Injection Zone: RED SAND
Maximum Authorized Injection Rate: 300 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>130</u>	_____	_____	_____	<u>6</u>
	February	<u>139</u>	_____	_____	_____	<u>4</u>
	March	<u>149</u>	_____	_____	_____	<u>4</u>
	April	<u>94</u>	_____	_____	_____	<u>7</u>
	May	<u>100</u>	_____	_____	_____	<u>7</u>
	June	<u>110</u>	_____	_____	_____	<u>8</u>
	July	<u>20</u>	_____	_____	_____	<u>9</u>
	August	<u>100</u>	_____	_____	_____	<u>8</u>
	September	<u>60</u>	_____	_____	_____	<u>6</u>
	October	<u>35</u>	_____	_____	_____	<u>5</u>
	November	<u>50</u>	_____	_____	_____	<u>6</u>
	December	<u>132</u>	_____	_____	_____	<u>6</u>
	TOTAL	<u>1119</u>	_____	<u>0</u>	_____	_____

Submitted Electronically