KOLAR Document ID: 1884420

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 # 7160
Name: Wrestler, David L., a General Partnership
Address 1: 1776 GEORGIA RD
Address 2:
City: HUMBOLDT State: KS Zip: 66748 + 1500
Contact Person: David Wrestler
Phone: (620) 423-8795
Lease Name: BRINKMYER
Well Number: INJ.2

API No.: 15-001-31371-00-00
Permit No: E32176.3
Reporting Year: 2025
(January 1 to December 31)

____ - NE - SW - SE Sec. 35 Twp. 26 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
1282 feet from ☐ N / ☑ S Line of Section
1357 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 450 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 50 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	640	375			31
February	620	375			28
March	640	375			31
April	650	375			30
May	670	375			31
June	660	375			30
July	650	375			30
August	645	375			31
September	655	375			30
October	630	375			31
November	625	375			30
December	610	375			31
TOTAL	7695		0		

Submitted Electronically