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 # 34318
Name: BEREXCO LLC
Address 1: 2020 N BRAMBLEWOOD
Address 2:
City: WICHITA State: KS Zip: 67206 + 1094
Contact Person: Paula White
Phone: (316) 265-3311
Lease Name: COBB
Well Number: 2

API No.: 15-097-20122-00-02
Permit No: D16359.0
Reporting Year: 2025
(January 1 to December 31)

S2 - N2 - SW - SW Sec. 29 Twp. 30 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
786 feet from ☐ N / ☑ S Line of Section
4610 feet from ☑ E / ☐ W Line of Section
County: Kiowa

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: Additives:
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 150 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	591	0	0	0	31
February	460	0	0	0	28
March	882	0	0	0	31
April	865	0	0	0	30
May	565	0	0	0	31
June	1349	0	0	0	30
July	1348	0	0	0	31
August	1263	0	0	0	31
September	1255	0	0	0	30
October	1374	0	0	0	31
November	1005	0	0	0	30
December	1140	0	0	0	31
TOTAL	12097		0		

Submitted Electronically