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 # 36169
Name: Bluejacket Operating, LLC
Address 1: PO BOX 340
Address 2:
City: EASTLAKE State: CO Zip: 80614 + 0340
Contact Person: Patrick Ihme
Phone: (720) 273-5948
Lease Name: UNIT 1
Well Number: WW 29DE

API No.: 15-205-28271-00-00
Permit No: E09937.91
Reporting Year: 2025
(January 1 to December 31)

____ - NE - NW - SW Sec. 29 Twp. 30 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
2441 feet from ☐ N / ☑ S Line of Section
3976 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 800 psi Injection Zone: Neodesha
Maximum Authorized Injection Rate: 1100 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	1270	125	0	0	31
February	995	125	0	0	28
March	1294	125	0	0	31
April	1059	125	0	0	30
May	1333	125	0	0	30
June	1336	125	0	0	30
July	1090	125	0	0	31
August	1293	125	0	0	31
September	949	125	0	0	30
October	958	125	0	0	31
November	901	125	0	0	30
December	590	125	0	0	31
TOTAL	13068		0		

Submitted Electronically