

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 # 35775
Name: Legacy Energy LLC
Address 1: PO BOX 162
Address 2: _____
City: RUSSELL State: KS Zip: 67665 + 0162
Contact Person: Chad A Counts
Phone: (785) 324-0301
Lease Name: HAYS B INJ
Well Number: 1

API No.: 15-141-20211-00-01
Permit No: E27236.1
Reporting Year: 2025
(January 1 to December 31)
____ - SW - SW - NE Sec. 32 Twp. 8 S. R. 15 ☐ E ☒ W
(a/a/a/a)
2994 feet from ☐ N / ☒ S Line of Section
2280 feet from ☒ E / ☐ W Line of Section
County: Osborne

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: 1250 psi Injection Zone: LANSING-KANSAS CITY, TOPEKA, TORONTO
Maximum Authorized Injection Rate: 500 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>7500</u>	<u>200</u>			<u>31</u>
	February	<u>6800</u>	<u>200</u>			<u>28</u>
	March	<u>7000</u>	<u>200</u>			<u>31</u>
	April	<u>7500</u>	<u>200</u>			<u>30</u>
	May	<u>7800</u>	<u>200</u>			<u>31</u>
	June	<u>7000</u>	<u>200</u>			<u>30</u>
	July	<u>7500</u>	<u>200</u>			<u>31</u>
	August	<u>7500</u>	<u>200</u>			<u>31</u>
	September	<u>7000</u>	<u>200</u>			<u>30</u>
	October	<u>7500</u>	<u>200</u>			<u>31</u>
	November	<u>7200</u>	<u>200</u>			<u>30</u>
	December	<u>7700</u>	<u>200</u>			<u>31</u>
	TOTAL	<u>88000</u>		<u>0</u>		

Submitted Electronically