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 # 5030
Name: Vess Oil Corporation
Address 1: 1700 N WATERFRONT PKWY BLDG 500
Address 2:
City: WICHITA State: KS Zip: 67206 + 6619
Contact Person: Michelle Henning
Phone: (316) 682-1537
Lease Name: SCHROEDER
Well Number: 2

API No.: 15-053-20627-00-01
Permit No: D23368.0
Reporting Year: 2025
(January 1 to December 31)

____ - NW - NE - SW Sec. 29 Twp. 17 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
2580 feet from ☐ N / ☑ S Line of Section
3653 feet from ☑ E / ☐ W Line of Section
County: Ellsworth

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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1000 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	5766				31
February	5208				28
March	5766				31
April	5580				30
May	5766				31
June	5580				30
July	5766				31
August	5766				31
September	5580				30
October	5766				31
November	5580				30
December	5766				31
TOTAL	67890		0		

Submitted Electronically