

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 # 35588  
Name: Little Chief Energy Corporation  
Address 1: PO BOX 965  
Address 2: \_\_\_\_\_  
City: INDEPENDENCE State: KS Zip: 67301 + 0965  
Contact Person: Keaton Boles  
Phone: (918) 907-0136  
Lease Name: LAMPSON  
Well Number: 2A 23-32-9

API No.: 15-019-27282-00-01  
Permit No: D31487.0  
Reporting Year: 2025  
(January 1 to December 31)  
\_\_\_\_ - NE - NE - NE Sec. 23 Twp. 32 S. R. 9 ☒ E ☐ W  
(a/a/a/a)  
5167 feet from ☐ N / ☒ S Line of Section  
417 feet from ☒ E / ☐ W Line of Section  
County: Chautauqua

## 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: ARBUCKLE  
Maximum Authorized Injection Rate: 20000 barrels per day  
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: \_\_\_\_\_ (Include TA's)

| III. | Month:       | Total Fluid Injected<br>BBL | Maximum Fluid<br>Pressure | Total Gas Injected<br>MCF | Maximum Gas<br>Pressure | # Days of<br>Injection |
|------|--------------|-----------------------------|---------------------------|---------------------------|-------------------------|------------------------|
|      | January      | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | February     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | March        | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | April        | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | May          | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | June         | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | July         | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | August       | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | September    | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | October      | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | November     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | December     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | <b>TOTAL</b> | <u>0</u>                    |                           | <u>0</u>                  |                         |                        |

Submitted Electronically