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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 # 33813
Name: Jason Oil Company, LLC
Address 1: 3718- 183RD ST
Address 2: PO BOX 701
City: RUSSELL State: KS Zip: 67665 + 0701
Contact Person: SHELDON WEIGEL
Phone: (785) 483-4204
Lease Name: UNREIN SWD
Well Number: 2

API No.: 15-145-00107-00-01
Permit No: D32117.0
Reporting Year: 2015
(January 1 to December 31)

____ - NW - NE - NE Sec. 25 Twp. 20 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
4941 feet from ☐ N / ☑ S Line of Section
993 feet from ☑ E / ☐ W Line of Section
County: Pawnee

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: 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	1798	0	0		31
February	1624	0	0		28
March	1798	0	0		31
April	1740	0	0		30
May	1798	0	0		31
June	1740	0	0		30
July	1798	0	0		31
August	1798	0	0		31
September	1740	0	0		30
October	1798	0	0		31
November	1740	0	0		30
December	1798	0	0		0
TOTAL	21170		0		

Submitted Electronically