



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 # 33640
Name: Haas Petroleum, LLC
Address 1: 10551 Barkley St. #307
Address 2: _____
City: Overland Park State: KS Zip: 66212 + 1812
Contact Person: Julie Barber
Phone: (913) 499-8373
Lease Name: East Lidikay
Well Number: 40i-HP

API No.: 15-059-26966-00-00
Permit No.: E28723.37
Reporting Year: 2015
(January 1 to December 31)
SE - SE - NE - S2 Sec. 4 Twp. 16 S. R. 21 ☒ E ☐ W
(a/a/a/a)
735 feet from ☐ N / ☒ S Line of Section
330 feet from ☒ E / ☐ W Line of Section
County: Franklin

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: Surfactant
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 700 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 60 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>0</u>		<u>0</u>		
	February	<u>0</u>		<u>0</u>		
	March	<u>0</u>		<u>0</u>		
	April	<u>0</u>		<u>0</u>		
	May	<u>0</u>		<u>0</u>		
	June	<u>0</u>		<u>0</u>		
	July	<u>0</u>		<u>0</u>		
	August	<u>0</u>		<u>0</u>		
	September	<u>0</u>		<u>0</u>		
	October	<u>133</u>	<u>60</u>	<u>0</u>		<u>31</u>
	November	<u>143</u>	<u>60</u>	<u>0</u>		<u>30</u>
	December	<u>176</u>	<u>60</u>	<u>0</u>		<u>31</u>
	TOTAL	<u>452</u>		<u>0</u>		

Submitted Electronically