1346543

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 # 31714
Name: Novy Oil & Gas, Inc.
Address 1: PO BOX 559
Address 2:
City: GODDARD State: KS Zip: 67052 + 0559
Contact Person: Michael Novy
Phone: (316) 794-7200
Lease Name: BEYMER B
Well Number: 1

API No.: 15-093-20274-00-01
Permit No: E24127.1
Reporting Year: 2016
(January 1 to December 31)

____ - ____ - NW - SE Sec. 16 Twp. 21 S. R. 35 ☐ E ☑ W
(Q/Q/Q/Q)
1967 feet from ☐ N / ☑ S Line of Section
1884 feet from ☑ E / ☐ W Line of Section
County: Kearny

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: 1500 psi Injection Zone: MARMATON
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	1860	0	0		31
February	1700	0	0		29
March	1810	0	0		31
April	1825	0	0		30
May	1730	0	0		31
June	1740	0	0		30
July	1705	0	0		31
August	1695	0	0		31
September	2301	0	0		30
October	2015	0	0		31
November	1740	0	0		30
December	1810	0	0		31
TOTAL	21931		0		

Submitted Electronically