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: SCHOEPF
Well Number: 10-23

API No.: 15-135-21577-00-03
Permit No: D28305.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - NW - SE Sec. 23 Twp. 16 S. R. 26 ☐ E ☑ W
(Q/Q/Q/Q)
2014 feet from ☐ N / ☑ S Line of Section
1972 feet from ☑ E / ☐ W Line of Section
County: Ness

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: 300 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 2000 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	13950	0	0		31
February	12600	0	0		28
March	12989	0	0		31
April	12600	0	0		30
May	12989	0	0		31
June	12600	0	0		30
July	12989	0	0		31
August	12989	0	0		31
September	12600	0	0		30
October	11780	0	0		31
November	11400	0	0		30
December	11780	0	0		31
TOTAL	151266		0		

Submitted Electronically