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 # 5684
Name: Sage, Larry George
Address 1: PO BOX 12
Address 2:
City: VIRGIL State: KS Zip: 66870 + 0012
Contact Person: Kelly Sage
Phone: (620) 437-6103
Lease Name: ROBISON
Well Number: 6

API No.: 15-073-23096-00-01
Permit No: E24613.1
Reporting Year: 2018
(January 1 to December 31)

SW - SE - NE - SW Sec. 5 Twp. 25 S. R. 13 ☑ E ☐ W
(Q/Q/Q/Q)
1590 feet from ☐ N / ☑ S Line of Section
3234 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: Bartlesville

Maximum Authorized Injection Rate: 300 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	100	375	0	0	31
February	100	375	0	0	28
March	600	375	0	0	31
April	500	375	0	0	30
May	500	375	0	0	31
June	500	375	0	0	30
July	600	375	0	0	31
August	600	375	0	0	31
September	600	375	0	0	30
October	600	375	0	0	31
November	600	375	0	0	30
December	600	375	0	0	31
TOTAL	5900		0		

Submitted Electronically