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: HURST
Well Number: 1

API No.: 15-155-01003-00-02
Permit No: D23565.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SW - SW Sec. 22 Twp. 23 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
4950 feet from ☑ E / ☐ W Line of Section
County: Reno

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: 12000 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	46275	0	0		25
February	38810	0	0		27
March	9575	0	0		31
April	11405	0	0		30
May	7600	0	0		23
June	10200	0	0		30
July	10540	0	0		31
August	10540	0	0		23
September	4620	0	0		14
October	1020	0	0		31
November	9670	0	0		21
December	8245	0	0		17
TOTAL	168500		0		

Submitted Electronically