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 BENNETT
Phone: ( 785 ) 483-4204
Lease Name: MAYNETTA (YOUNGER)
Well Number: 2

API No.: 15-051-19172-00-02
Permit No: D19245.0
Reporting Year: 2019
*(January 1 to December 31)*

____ - SW - SW - SE Sec. 23 Twp. 13 S. R. 20 ☐ E ☑ W
*(Q/Q/Q/Q)*
326 feet from ☐ N / ☑ S Line of Section
2333 feet from ☑ E / ☐ W Line of Section
County: Ellis

**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: CEDAR HILLS
Maximum Authorized Injection Rate: 1000 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 | 5053 | 0 | 0 | 0 | 31 |
| February | 4564 | 0 | 0 | 0 | 28 |
| March | 5053 | 0 | 0 | 0 | 31 |
| April | 4890 | 0 | 0 | 0 | 30 |
| May | 5053 | 0 | 0 | 0 | 31 |
| June | 4890 | 0 | 0 | 0 | 30 |
| July | 5053 | 0 | 0 | 0 | 31 |
| August | 5053 | 0 | 0 | 0 | 31 |
| September | 4890 | 0 | 0 | 0 | 30 |
| October | 5053 | 0 | 0 | 0 | 31 |
| November | 4890 | 0 | 0 | 0 | 30 |
| December | 5053 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 59495 | | 0 | | |

Submitted Electronically