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 # 33640
Name: Haas Petroleum, LLC
Address 1: 8900 STATE LINE RD STE 330
Address 2:
City: LEAWOOD State: KS Zip: 66206 + 1936
Contact Person: Mark Haas
Phone: (913) 499-8373
Lease Name: DAVIS G H
Well Number: B 5

API No.: 15-197-19071-00-02
Permit No: D02462.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NE - NE Sec. 4 Twp. 14 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
4298 feet from ☐ N / ☑ S Line of Section
1012 feet from ☑ E / ☐ W Line of Section
County: Wabaunsee

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: 400 psi Injection Zone: HUNTON
Maximum Authorized Injection Rate: 10000 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					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November	27967	200	0	0	30
December	34978	200	0	0	31
TOTAL	62945		0		

Submitted Electronically