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: HUBBS-STULL (SWD)
Well Number: 1

API No.: 15-165-20911-00-01
Permit No: D28081.0
Reporting Year: 2019
(January 1 to December 31)

____ - E2 - NW - SE Sec. 14 Twp. 16 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
2318 feet from ☐ N / ☑ S Line of Section
1639 feet from ☑ E / ☐ W Line of Section
County: Rush

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: 5000 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	9102	0	0	0	31
February	6409	0	0	0	28
March	3566	0	0	0	25
April	0	0	0	0	0
May	2519	0	0	0	15
June	8204	0	0	0	30
July	7755	0	0	0	31
August	0	0	0	0	0
September	2519	0	0	0	15
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	40074		0		

Submitted Electronically