

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: Julie Barber
Phone: (913) 499-8373
Lease Name: BURKE B
Well Number: B 2

API No.: 15-073-19739-00-00
Permit No.: E07563.15
Reporting Year: 2019
(January 1 to December 31)
SE - NW - SW - Sec. 7 Twp. 24 S. R. 10 ☒ E ☐ W
(a/a/a/a)
1650 feet from ☐ N / ☒ S Line of Section
4190 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: Biocide
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1100 psi Injection Zone: Bartlesville
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	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	February	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	March	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	April	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	May	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	June	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	July	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	August	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	September	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	October	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	November	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	December	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	TOTAL	<u>0</u>		<u>0</u>		

Submitted Electronically