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 # 34310
Name: New Age Oil LLC
Address 1: 1563 RIDGE RD
Address 2:
City: HAYS State: KS Zip: 67601 + 1010
Contact Person: Travis Rozean
Phone: (785) 623-0473
Lease Name: KRAUS
Well Number: 5

API No.: 15-051-01697-00-03
Permit No: D20043.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - SW Sec. 21 Twp. 14 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
2316 feet from ☐ N / ☑ S Line of Section
5020 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: ARBUCKLE
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	15000				31
February	14500				29
March	15500				31
April	15000				30
May	15500				31
June	14500				30
July	15000				31
August	15500				31
September	14500				30
October	15000				31
November	15000				30
December	15000				31
TOTAL	180000		0		

Submitted Electronically