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 # 34518
Name: Basgall Oil LLC
Address 1: 1403 West 44th St.
Address 2:
City: HAYS State: KS Zip: 67601 + 1416
Contact Person: Bradly J Basgall
Phone: (785) 650-1809
Lease Name: R STAAB (ROSA STAAB)
Well Number: 3

API No.: 15-051-02698-00-02
Permit No: E27392.1
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SE - NW Sec. 7 Twp. 13 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
3579 feet from ☐ N / ☑ S Line of Section
3060 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: 500 psi Injection Zone: Kansas City Group
Maximum Authorized Injection Rate: 400 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	5425				31
February	4900				28
March	5425				31
April	5250				30
May	5425				31
June	5250				30
July	5425				31
August	5425				31
September	5410				30
October	5505				31
November	5730				30
December	5825				31
TOTAL	64995		0		

Submitted Electronically