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 # 33864
Name: Habit Petroleum, LLC
Address 1: 639 280TH AVE
Address 2: PO BOX 243
City: HAYS State: KS Zip: 67601 + 0243
Contact Person: Irvin E Haselhorst
Phone: (785) 623-1154
Lease Name: ROTH
Well Number: 2

API No.: 15-051-01024-00-01
Permit No: D23670.0
Reporting Year: 2020
(January 1 to December 31)

NW - NE - NE - SE Sec. 22 Twp. 15 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
2316 feet from ☐ N / ☑ S Line of Section
455 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: 500 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	1085				31
February	980				28
March	1085				31
April	1050				30
May	1050				31
June	1085				30
July	1085				31
August	1085				31
September	1050				30
October	1085				31
November	1050				30
December	1085				31
TOTAL	12775		0		

Submitted Electronically