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: UNREIN SWD
Well Number: 2

API No.: 15-145-00107-00-01
Permit No: D32117.0
Reporting Year: 2021
(January 1 to December 31)

____ - NW - NE - NE Sec. 25 Twp. 20 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
4941 feet from ☐ N / ☑ S Line of Section
993 feet from ☑ E / ☐ W Line of Section
County: Pawnee

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: CEDAR HILLS
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	1550	0	0	0	31
February	1400	0	0	0	28
March	1550	0	0	0	31
April	750	0	0	0	15
May	465	0	0	0	31
June	450	0	0	0	30
July	465	0	0	0	31
August	465	0	0	0	31
September	450	0	0	0	30
October	465	0	0	0	31
November	450	0	0	0	30
December	465	0	0	0	31
TOTAL	8925		0		

Submitted Electronically