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 # 35755
Name: SAG Oil Company LLC
Address 1: PO BOX 67124
Address 2:
City: TOPEKA State: KS Zip: 66667 + 0124
Contact Person: Phillip Frick
Phone: (785) 969-2982
Lease Name: JOHN BELL
Well Number: N 4

API No.: 15-045-20069-00-01
Permit No: E23292.11
Reporting Year: 2021
(January 1 to December 31)

____ - SE - SW - SE Sec. 36 Twp. 14 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
636 feet from ☐ N / ☑ S Line of Section
1867 feet from ☑ E / ☐ W Line of Section
County: Douglas

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: 650 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 16 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0	0	0	0	0
February	0	0	0	0	0
March	205	600	0	0	20
April	580	600	0	0	30
May	541	600	0	0	31
June	664	600	0	0	30
July	536	600	0	0	31
August	679	600	0	0	31
September	647	600	0	0	30
October	601	600	0	0	31
November	629	600	0	0	30
December	584	600	0	0	31
TOTAL	5666		0		

Submitted Electronically