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: Jim Schoenberger
Phone: (785) 483-4204
Lease Name: KRAUS
Well Number: 5

API No.: 15-051-21379-00-00
Permit No: D19197.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - SW - SE Sec. 26 Twp. 13 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
1024 feet from ☐ N / ☑ S Line of Section
1727 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: 2000 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	27380				31
February	25425				28
March	27465				31
April	26650				30
May	27430				31
June	26615				30
July	27535				31
August	27455				31
September	26400				30
October	27455				31
November	26480				30
December	27455				31
TOTAL	323745		0		

Submitted Electronically