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 367
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 0367
Contact Person: Phillip Frick
Phone: (785) 969-2982
Lease Name: PEDROW
Well Number: 4-IW

API No.: 15-003-25699-00-00
Permit No: E30287.134
Reporting Year: 2023
(January 1 to December 31)

____ - N2 - N2 - NE Sec. 28 Twp. 20 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
330 feet from ☑ N / ☐ S Line of Section
1320 feet from ☑ E / ☐ W Line of Section
County: Anderson

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: Squirrel
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 41 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	317	500	0	0	31
February	339	500	0	0	28
March	313	500	0	0	31
April	276	500	0	0	30
May	339	500	0	0	31
June	394	500	0	0	30
July	373	500	0	0	31
August	268	500	0	0	31
September	373	500	0	0	30
October	308	500	0	0	31
November	318	500	0	0	30
December	270	500	0	0	31
TOTAL	3888		0		

Submitted Electronically