1288173

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 # 32044
Name: Trimble & Maclaskey Oil LLC
Address 1: 110 SOUTH ST
Address 2: PO BOX 171
City: GRIDLEY State: KS Zip: 66852 + ___ ___ ___ ___
Contact Person: Randall Trimble
Phone: (620) 836-2000
Lease Name: MACLASKEY B
Well Number: 3

API No.: 15-207-19693-00-01
Permit No: E27080.1
Reporting Year: 2015
(January 1 to December 31)

___ - SW - SE - SW Sec. 20 Twp. 23 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
350 feet from ☐ N / ☑ S Line of Section
3840 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 450 psi Injection Zone: Mississippi
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	4495	250	0		31
February	4060	250	0		28
March	4495	250	0		31
April	4350	250	0		30
May	4495	250	0		31
June	4350	250	0		30
July	4495	250	0		31
August	4495	250	0		31
September	4350	250	0		30
October	4495	250	0		31
November	4350	250	0		30
December	4495	250	0		31
TOTAL	52925		0		

Submitted Electronically