1288174

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 C
Well Number: 1

API No.: 15-207-02144-00-01
Permit No: E21052.1
Reporting Year: 2015
(January 1 to December 31)

___ - SE - SE - SE Sec. 19 Twp. 23 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
339 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: 600 psi Injection Zone: Mississippi
Maximum Authorized Injection Rate: 200 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	775	300	0		31
February	700	300	0		28
March	775	300	0		31
April	750	300	0		30
May	775	300	0		31
June	750	300	0		30
July	775	300	0		31
August	775	300	0		31
September	750	300	0		30
October	775	300	0		31
November	750	300	0		30
December	775	300	0		31
TOTAL	9125		0		

Submitted Electronically