



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 # 31019
Name: Diamond Star Oil, Inc.
Address 1: 219 BROOKSIDE DR
Address 2: _____
City: PAOLA State: KS Zip: 66071 + 1111
Contact Person: John Paulsen
Phone: (913) 731-5646
Lease Name: PAULSEN
Well Number: BI-6

API No.: 15-121-28760-00-00
Permit No.: E30690.6
Reporting Year: 2015
(January 1 to December 31)
SW - SW - SE - SW Sec. 31 Twp. 16 S. R. 24 ☒ E ☐ W
(a/a/a/a)
291 feet from ☐ N / ☒ S Line of Section
4084 feet from ☒ E / ☐ W Line of Section
County: Miami

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: 400 psi Injection Zone: Cattleman
Maximum Authorized Injection Rate: 100 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	<u>853</u>	<u>400</u>	<u>0</u>		<u>31</u>
	February	<u>816</u>	<u>400</u>	<u>0</u>		<u>28</u>
	March	<u>834</u>	<u>400</u>	<u>0</u>		<u>31</u>
	April	<u>826</u>	<u>400</u>	<u>0</u>		<u>30</u>
	May	<u>844</u>	<u>400</u>	<u>0</u>		<u>31</u>
	June	<u>841</u>	<u>400</u>	<u>0</u>		<u>30</u>
	July	<u>853</u>	<u>400</u>	<u>0</u>		<u>31</u>
	August	<u>858</u>	<u>400</u>	<u>0</u>		<u>31</u>
	September	<u>849</u>	<u>400</u>	<u>0</u>		<u>30</u>
	October	<u>854</u>	<u>400</u>	<u>0</u>		<u>31</u>
	November	<u>826</u>	<u>400</u>	<u>0</u>		<u>30</u>
	December	<u>837</u>	<u>400</u>	<u>0</u>		<u>31</u>
	TOTAL	<u>10091</u>		<u>0</u>		

Submitted Electronically