1290200

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 # 5399
Name: Trek AEC, LLC
Address 1: 4925 GREENVILLE AVE.,
Address 2: SUITE 915
City: DALLAS State: TX Zip: 75206 + ___ ___ ___ ___
Contact Person: Mindy Wooten
Phone: ( 214 ) 373-0318
Lease Name: CHESTER SCHMIDT
Well Number: 2

API No.: 15-113-21195-00-00
Permit No: D25199.0
Reporting Year: 2015
*(January 1 to December 31)*

____ - SW - NW - NW Sec. 30 Twp. 19 S. R. 1 ☐ E ☑ W
*(Q/Q/Q/Q)*
2295 feet from ☐ N / ☑ S Line of Section
4660 feet from ☑ E / ☐ W Line of Section
County: McPherson

**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: 10000 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 | 35064 | 0 | 0 | | 31 |
| February | 28568 | 0 | 0 | | 28 |
| March | 27676 | 0 | 0 | | 31 |
| April | 23920 | 0 | 0 | | 30 |
| May | 10167 | 0 | 0 | | 31 |
| June | 57791 | 0 | 0 | | 30 |
| July | 66886 | 0 | 0 | | 31 |
| August | 65749 | 0 | 0 | | 31 |
| September | 64612 | 0 | 0 | | 30 |
| October | 69160 | 0 | 0 | | 31 |
| November | 66886 | 0 | 0 | | 30 |
| December | 48190 | 0 | 0 | | 31 |
| ***TOTAL*** | 564669 | | 0 | | |

Submitted Electronically