



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 # _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____
Lease Name: _____
Well Number: _____

API No.: _____
Permit No.: _____
Reporting Year: _____
(January 1 to December 31)
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
County: _____

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: _____ psi Injection Zone: _____
Maximum Authorized Injection Rate: _____ 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 | _____ | _____ | _____ | _____ | _____ |
| | February | _____ | _____ | _____ | _____ | _____ |
| | March | _____ | _____ | _____ | _____ | _____ |
| | April | _____ | _____ | _____ | _____ | _____ |
| | May | _____ | _____ | _____ | _____ | _____ |
| | June | _____ | _____ | _____ | _____ | _____ |
| | July | _____ | _____ | _____ | _____ | _____ |
| | August | _____ | _____ | _____ | _____ | _____ |
| | September | _____ | _____ | _____ | _____ | _____ |
| | October | _____ | _____ | _____ | _____ | _____ |
| | November | _____ | _____ | _____ | _____ | _____ |
| | December | _____ | _____ | _____ | _____ | _____ |
| | TOTAL | _____ | _____ | _____ | _____ | _____ |

Salt Water Disposal Report for PPSI

| LEASE | County | PH | Specific Gravity | Total Dissolved Solids |
|------------------------|---------------|-------------|-------------------------|-------------------------------|
| Hay | Wabanssee | 7.00 | 1.010 | 16,586 |
| Skinner | Barber | 6.50 | 1.170 | 229,500 |
| Barkley | Barber | 6.50 | 1.150 | 238,557 |
| Weller | Pratt | 6.00 | 1.135 | 218,024 |
| Bosch | Morris | 6.50 | 1.018 | 14,649 |
| Eaton | Butler | 7.00 | 1.065 | 79,752 |
| Ralston | Butler | 6.96 | 1.033 | 163,890 |
| Bohrer | Kingman | 6.75 | 1.135 | 223,796 |
| Seward | Kingman | 6.00 | 1.155 | 224,873 |
| Trostle | Kingman | 6.00 | 1.170 | 223,175 |
| Latta 5 | Sumner | 7.00 | 1.150 | 241,979 |
| Shinn | Sumner | 6.00 | 1.150 | 206,224 |
| Van Allen | Sumner | 6.80 | 1.150 | 242,264 |
| Fussell | Cowley | 6.00 | 1.160 | 235,843 |
| Cornelius | Barton | 7.00 | 1.020 | 44,386 |
| McClain | Nemaha | 6.50 | 1.025 | 13,829 |
| Swart I | Nemaha | 7.50 | 1.025 | 23,630 |
| Copeland | Ness | | 1.030 | 49,522 |
| Irsik B 1 | Gray | | 1.070 | 96,486 |
| Irsik State B 1 | Gray | | 1.06 | 105,913 |
| Irsik 1 | Gray | | 1.06 | 105,913 |

| | | | | | |
|------------------------|---------|-----|------|-------------|----------------|
| Irsik State C 1 | Gray | | | 1.06 | 105,913 |
| Strawn Mobil | Gray | | | 1.06 | 105,913 |
| Booth 4 | Russell | 6.5 | 1.03 | | 44,687 |
| F. Krug 1 | Russell | 6.5 | 1.1 | | 163,308 |
| F Krug 6 | Russell | | 1.1 | | 163,308 |
| Reich B 5 | Russell | 6.5 | 1.07 | | 103,555 |
| Reich C 2 | Russell | 6.5 | 1.07 | | 97,113 |
| Conell 1 | Ellis | 6.8 | 1.05 | | 74,029 |
| Madden 2 | Ellis | 6.8 | 1.03 | | 49,836 |