



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 # 33999
Name: Linn Operating, Inc.
Address 1: 600 TRAVIS STE 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + 3018
Contact Person: Shawn Hildreth
Phone: (281) 840-4234
Lease Name: WHITE ERNEST
Well Number: 1

API No.: 15-093-20696-00-00
Permit No.: D19847.0
Reporting Year: 2016
(January 1 to December 31)
____ - NW - NW - NE Sec. 4 Twp. 26 S. R. 35 ☐ E ☒ W
(a/a/a/a)
6933 feet from ☐ N / ☒ S Line of Section
1980 feet from ☒ E / ☐ W Line of Section
County: Kearny

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: 500 psi Injection Zone: GLORIETTA
Maximum Authorized Injection Rate: 1500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 (Include TA's)

III.	Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
	January	<u>5370</u>	<u>7</u>	<u>0</u>		<u>31</u>
	February	<u>7290</u>	<u>8</u>	<u>0</u>		<u>29</u>
	March	<u>7720</u>	<u>16</u>	<u>0</u>		<u>31</u>
	April	<u>9220</u>	<u>13</u>	<u>0</u>		<u>30</u>
	May	<u>7540</u>	<u>7</u>	<u>0</u>		<u>31</u>
	June	<u>5726</u>	<u>2</u>	<u>0</u>		<u>30</u>
	July	<u>5990</u>	<u>1</u>	<u>0</u>		<u>31</u>
	August	<u>5360</u>	<u>14</u>	<u>0</u>		<u>31</u>
	September	<u>8470</u>	<u>16</u>	<u>0</u>		<u>30</u>
	October	<u>8300</u>	<u>19</u>	<u>0</u>		<u>31</u>
	November	<u>7260</u>	<u>21</u>	<u>0</u>		<u>30</u>
	December	<u>7880</u>	<u>48</u>	<u>0</u>		<u>31</u>
	TOTAL	<u>86126</u>		<u>0</u>		

Submitted Electronically