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 # 9408
Name: Trans Pacific Oil Corporation
Address 1: 100 S MAIN STE 200
Address 2:
City: WICHITA State: KS Zip: 67202 + 3735
Contact Person: Glenna Lowe
Phone: (316) 262-3596
Lease Name: FRISBIE C
Well Number: 2

API No.: 15-051-21693-00-02
Permit No: D21564.0
Reporting Year: 2017
(January 1 to December 31)

____ - W2 - SE - NE Sec. 18 Twp. 11 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
3241 feet from ☐ N / ☑ S Line of Section
1074 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: GRANIT WASH
Maximum Authorized Injection Rate: 1500 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	635	0	0		31
February	550	0	0		28
March	785	0	0		31
April	1255	0	0		30
May	1360	0	0		31
June	1095	0	0		30
July	1575	0	0		31
August	1985	0	0		31
September	1275	0	0		30
October	1150	0	0		31
November	1285	0	0		30
December	1385	0	0		31
TOTAL	14335		0		

Submitted Electronically