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: STUTZ H
Well Number: 1

API No.: 15-135-20801-00-01
Permit No: D27848.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SE - SW Sec. 8 Twp. 17 S. R. 25 ☐ E ☑ W
(Q/Q/Q/Q)
711 feet from ☐ N / ☑ S Line of Section
3293 feet from ☑ E / ☐ W Line of Section
County: Ness

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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	4580	0	0		31
February	4580	0	0		28
March	4850	0	0		31
April	4850	0	0		30
May	4850	0	0		31
June	4850	0	0		30
July	4850	0	0		31
August	4850	0	0		31
September	4850	0	0		30
October	4850	0	0		31
November	4850	0	0		30
December	4850	0	0		31
TOTAL	57660		0		

Submitted Electronically