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 # 32044
Name: Trimble & Maclaskey Oil LLC
Address 1: 110 SOUTH ST
Address 2: PO BOX 171
City: GRIDLEY State: KS Zip: 66852 + ___ ___ ___ ___
Contact Person: JIM THWEATT
Phone: (620) 836-2000
Lease Name: MILLS
Well Number: M 3

API No.: 15-207-21734-00-01
Permit No: D21740.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - ____ - NE Sec. 24 Twp. 25 S. R. 13 ☑ E ☐ W
(Q/Q/Q/Q)
3328 feet from ☐ N / ☑ S Line of Section
77 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: ARBUCKLE
Maximum Authorized Injection Rate: 3000 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	930	40	0		31
February	840	40	0		28
March	930	40	0		31
April	900	40	0		30
May	930	40	0		31
June	900	40	0		30
July	930	40	0		31
August	930	40	0		31
September	900	40	0		30
October	930	40	0		31
November	900	40	0		30
December	930	40	0		31
TOTAL	10950		0		

Submitted Electronically