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: OLINGER B
Well Number: 2 D

API No.: 15-031-21633-00-00
Permit No: D24373.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SW - NW Sec. 14 Twp. 23 S. R. 13 ☑ E ☐ W
(Q/Q/Q/Q)
3440 feet from ☐ N / ☑ S Line of Section
4540 feet from ☑ E / ☐ W Line of Section
County: Coffey

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: KANSAS CITY
Maximum Authorized Injection Rate: 250 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	4185	0	0		31
February	3500	0	0		28
March	4185	0	0		31
April	4050	0	0		30
May	4185	0	0		31
June	4050	0	0		30
July	4185	0	0		31
August	4185	0	0		31
September	4050	0	0		30
October	4185	0	0		31
November	4050	0	0		30
December	4185	0	0		31
TOTAL	48995		0		

Submitted Electronically