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 # 33971
Name: TriPower Resources, LLC
Address 1: PO BOX 849
Address 2:
City: ARDMORE State: OK Zip: 73402 + 0849
Contact Person: Jim Thornton
Phone: ( 580 ) 226-6700
Lease Name: BLUESTEM
Well Number: 5

API No.: 15-015-22183-00-01
Permit No: E23424.5
Reporting Year: 2017
*(January 1 to December 31)*

____ - SW - SE - NE Sec. 20 Twp. 24 S. R. 5 ☑ E ☐ W
*(Q/Q/Q/Q)*
2949 feet from ☐ N / ☑ S Line of Section
1010 feet from ☑ E / ☐ W Line of Section
County: Butler

**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: 1000 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 6 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 2323 | 139 | 0 | | 31 |
| February | 2300 | 148 | 0 | | 28 |
| March | 2086 | 157 | 0 | | 31 |
| April | 2375 | 133 | 0 | | 30 |
| May | 2332 | 142 | 0 | | 31 |
| June | 2391 | 143 | 0 | | 30 |
| July | 2334 | 135 | 0 | | 31 |
| August | 2329 | 147 | 0 | | 31 |
| September | 2369 | 148 | 0 | | 30 |
| October | 2366 | 150 | 0 | | 31 |
| November | 2267 | 149 | 0 | | 30 |
| December | 2338 | 149 | 0 | | 31 |
| ***TOTAL*** | 27810 | | 0 | | |

Submitted Electronically