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: Robbi Herrman
Phone: (620) 836-2000
Lease Name: JOHNSON
Well Number: 42

API No.: 15-073-19792-00-01
Permit No: E24387.2
Reporting Year: 2018
(January 1 to December 31)

____ - ____ - SW - NE Sec. 23 Twp. 24 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
1980 feet from ☐ N / ☑ S Line of Section
3300 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 550 psi Injection Zone: Mississippian
Maximum Authorized Injection Rate: 500 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	8680	450	0	0	31
February	7840	450	0	0	28
March	8680	450	0	0	31
April	8400	450	0	0	30
May	8680	450	0	0	31
June	8400	450	0	0	30
July	8680	450	0	0	31
August	8680	450	0	0	31
September	8400	450	0	0	30
October	8680	450	0	0	31
November	8400	450	0	0	30
December	8680	450	0	0	31
TOTAL	102200		0		

Submitted Electronically