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 + 0171
Contact Person: Robbi Herrman
Phone: (620) 836-2000
Lease Name: H W HUGHES
Well Number: 22

API No.: 15-111-20372-00-03
Permit No: D27914.0
Reporting Year: 2019
(January 1 to December 31)

NW - SW - ____ - ____ Sec. 19 Twp. 21 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
1980 feet from ☐ N / ☑ S Line of Section
4650 feet from ☑ E / ☐ W Line of Section
County: Lyon

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: 400 psi Injection Zone: Kansas City
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	5363	250	0	0	31
February	4844	250	0	0	28
March	5363	250	0	0	31
April	5190	250	0	0	30
May	5363	250	0	0	31
June	5190	250	0	0	30
July	5363	250	0	0	31
August	5363	250	0	0	31
September	5190	250	0	0	30
October	5363	250	0	0	31
November	5190	250	0	0	30
December	5363	250	0	0	31
TOTAL	63145		0		

Submitted Electronically