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: LINGENFELTER
Well Number: 1

API No.: 15-073-21586-00-02
Permit No: E20218.1
Reporting Year: 2020
*(January 1 to December 31)*

SE - NE - SE - ____ Sec. 20 Twp. 23 S. R. 13 ☑ E ☐ W
*(Q/Q/Q/Q)*
1650 feet from ☐ N / ☑ S Line of Section
330 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: 0 psi Injection Zone: Mississipian
Maximum Authorized Injection Rate: 150 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 | 2945 | 0 | 0 | 0 | 31 |
| February | 2755 | 0 | 0 | 0 | 29 |
| March | 2945 | 0 | 0 | 0 | 31 |
| April | 2850 | 0 | 0 | 0 | 30 |
| May | 2945 | 0 | 0 | 0 | 31 |
| June | 2850 | 0 | 0 | 0 | 30 |
| July | 2945 | 0 | 0 | 0 | 31 |
| August | 2945 | 0 | 0 | 0 | 31 |
| September | 2850 | 0 | 0 | 0 | 30 |
| October | 2945 | 0 | 0 | 0 | 31 |
| November | 2850 | 0 | 0 | 0 | 30 |
| December | 2945 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 34770 | | 0 | | |

Submitted Electronically