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 # 9408
Name: Trans Pacific Oil Corporation
Address 1: 100 S MAIN ST STE 200
Address 2:
City: WICHITA State: KS Zip: 67202 + 3735
Contact Person: Lisa Thimmesch
Phone: (316) 262-3596
Lease Name: HERMAN KARST
Well Number: 2

API No.: 15-009-21156-00-01
Permit No: D21471.0
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NW - SW Sec. 18 Twp. 16 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
4484 feet from ☐ N / ☑ S Line of Section
4187 feet from ☑ E / ☐ W Line of Section
County: Barton

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: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	992	0			31
February	896	0			28
March	13268	0			31
April	12871	0			30
May	13300	0			31
June	12884	0			30
July	1333	0			31
August	9106	0			31
September	8812	0			30
October	9106	0			31
November	8812	0			30
December	9106	0			31
TOTAL	100486		0		

Submitted Electronically