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: ALLISON B
Well Number: 8

API No.: 15-051-26642-00-00
Permit No: E31807.1
Reporting Year: 2021
(January 1 to December 31)

SW - NW - NE - NE Sec. 13 Twp. 11 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
4703 feet from ☐ N / ☑ S Line of Section
1307 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 300 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 1000 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	372				31
February	344				28
March	383				31
April	377				30
May	311				31
June	837				30
July	728				31
August	0				0
September	0				0
October	549				31
November	607				30
December	431				31
TOTAL	4939		0		

Submitted Electronically