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: HOYT
Well Number: D-1

API No.: 15-031-22596-00-01
Permit No: D30705.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - NW - SW Sec. 9 Twp. 21 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
1733 feet from ☐ N / ☑ S Line of Section
4542 feet from ☑ E / ☐ W Line of Section
County: Coffey

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: 100 psi Injection Zone: Arbuckle
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	4805	0	0	0	31
February	4340	0	0	0	28
March	4805	0	0	0	31
April	4650	0	0	0	30
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0		0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	18600		0		

Submitted Electronically