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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 # 5399
Name: Trek AEC, LLC
Address 1: 200 W DOUGLAS, SUITE 101
Address 2:
City: WICHITA State: KS Zip: 67202 + 3001
Contact Person: Mindy Wooten
Phone: (316) 263-5785
Lease Name: SHORT
Well Number: A-2

API No.: 15-077-21198-00-00
Permit No: D25867.0
Reporting Year: 2024
(January 1 to December 31)

____ - NE - SW - SE Sec. 12 Twp. 31 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
692 feet from ☐ N / ☑ S Line of Section
1934 feet from ☑ E / ☐ W Line of Section
County: Harper

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: 600 psi Injection Zone: Mississippian
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	6996	0	0	0	17
February	11299	0	0	0	25
March	11789	0	0	0	29
April	10459	0	0	0	24
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	4652	0	0	0	10
October	4530	0	0	0	11
November	7216	0	0	0	19
December	158	0	0	0	1
TOTAL	57099		0		

Submitted Electronically