UNITED STATES ENVIRONMENTAL PROTECTION AC WASHINGTON, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT NAME AND ADDRESS OF EXISTING PERMITTEE NAME AND ADDRESS OF SURFACE OWNER سيدي ديما يد يار STATE COUNT PERMIT NUMBER LOCATE WELL AND OUTLINE UNIT ON SECTION PLAT - 640 ACRES SURFACE LOCATION DESCRIPTION 1/4 SECTION TOWNSHIP LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT Surface 3 July 7 Fr - CODE 10 \_Line of quarter section ft. from (N/S) \_ ft. from (E/W) . Line of quarter section WELL ACTIVITY TYPE OF PERMIT ☐ Brine Disposal laubividual E ☐ Enhanced Recovery O Area ☐ Hydrocarbon Storage Number of Wells co-Notation gas Lease Name Well Number 50,10,00 — CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED

	INJECTION PRESSURE		TOTAL VOLUME INJECTED		(OPTIONAL MONITORING)	
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
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## CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

NAME AND OFFICIAL TITLE (Please type or print)	SIGNATURE	DATE SIGNED
Ronald & Torr	Korald M 1	an 01-21-2018
EPA Form 7520-11 (2-84)	Total bbis 0	compliance toview completes

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Form Approvad. OMB No. 2000-0042, Approval expires 9-30-86 UNITED STATES ENVIRONMENTAL PROTECTION AGE WASHINGTON, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT NAME AND ADDRESS OF EXISTING PERMITTEE NAME AND ADDRESS OF SURFACE OWNER TOUT TOUT ON FINA 218 EMPICK Dri SAMEseneca, OA 16346 STATE COUNTY PERMIT NUMBER LOCATE WELL AND OUTLINE UNIT ON SECTION PLAT - 640 ACRES SURFACE LOCATION DESCRIPTION **4 SECTION** TOWNSHIP LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT Surface : 1: ( a deliste 2 con 17 from three?

E G. 1030.

ft. from (N/S) \_\_\_\_ Line of quarter section ft. from (E/W) \_\_\_\_ Line of quarter section WELL ACTIVITY TYPE OF PERMIT ☑ Individual ☑ Area ☐ Brine Disposal ☐ Enhanced Recovery Number of Wells ☐ Hydrocarbon Storage wastlikerst Lease Name M Well Number

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TUBING - CASING ANNULUS PRESSURE

		INJECTION PRESSURE		TOTAL VOLUME INJECTED		(OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
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NAME AND OFFICIAL TITLE (Please type or print)	SIGNATURE	DATE SIGNED
Ropald Marr	Ronald M Tau	01-21-2018
	TOTAL 6615 - 17	

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