

OMB No. 2040-0042

United States Environmental Protection Agency

| Name and Address of Existing Permittee | | | | Name and Address of Surface Owner | | | | | |
|--|---|---|--|--|-----------------|--------------------------------|--|--|--|
| Gas & Oil Manageme 80 Dillon Drive Yo | | | Name and Address of Surface Owner Collins Pine RD#2 Kane, PA 16735 | | | | | | |
| Locate Well and O Section Plat - 640 A | | State PA | County Permit Number | | | | | | |
| | N _ | 1/4 of | Surface Location Description 1/4 of 1/4 of 1/4 of 1/4 of Section Township Range Locate well in two directions from nearest lines of quarter section and drilling unit | | | | | | |
| | ╼┠╸┽╼├╸┽╸ ╼┠╸┽╼├╸┽╸ | Surface Location and ft | ft. frm (N/S) | Line of quarter secti | | | | | |
| w | | _ Bri | ACTIVITY ne Disposal hanced Recovery drocarbon Storag | TYPE OF PEF Individua Area Number of W | ı | | | | |
| <u> </u> | ╌┠╌┼╌┼╌ | Lease | Lease Name Algonkin Trust #3 Well Number Lo | | | | | | |
| | S | | | | | | | | |
| | | PRESSURE | TOTAL VOLU | JME INJECTED | TUBING CASING A | ANNULUS PRESSUR MONITORING) | | | |
| MONTH YEAR | | PRESSURE MAXIMUM PSIG | TOTAL VOLU | JME INJECTED MCF | | | | | |
| MONTH YEAR January-2018 | INJECTION | 10 20 20 20 20 20 20 20 20 20 20 20 20 20 | STATE OF STA | | (OPTIONAL N | MONITORING) | | | |
| | INJECTION AVERAGE PSIG | MAXIMUM PSIG | BBL | MCF | (OPTIONAL N | MONITORING) | | | |
| January-2018 | INJECTION AVERAGE PSIG 800 | MAXIMUM PSIG 850 | BBL 150 | MCF 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 | AVERAGE PSIG 800 810 | 850 860 | 150 160 | 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 | AVERAGE PSIG 800 810 | 850 860 850 | 150 160 155 | 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 | 800 800 800 | 850 850 850 850 | 150 160 155 150 | 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 May-2018 | 800 800 810 800 790 | 850 850 850 850 840 | 150 160 155 150 | 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 May-2018 June-2018 | 800 800 810 800 810 800 800 | MAXIMUM PSIG | 150 160 155 150 133 | 0 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 May-2018 June-2018 July-2018 | 800 810 800 810 810 800 800 800 | 850 850 850 850 850 850 850 850 850 850 | 150 160 155 150 133 165 | 0 0 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 May-2018 June-2018 July-2018 August-2018 | 800 800 810 800 810 800 800 800 800 800 | MAXIMUM PSIG | 150 160 155 150 133 165 150 208 | 0 0 0 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |
| January-2018 February-2018 March-2018 April-2018 May-2018 June-2018 July-2018 August-2018 September-2018 | 800 810 800 810 800 810 800 800 810 810 | MAXIMUM PSIG | 150 160 155 150 133 165 150 208 | 0 0 0 0 0 0 0 0 | (OPTIONAL N | MONITORING) | | | |

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 possibliity of fine and imprisonment. (Ref. 40 CFR 144.32)

| Name | and | Official | Title | (Please | type | or | print) |
|----------------|-----|--|-------|---------|------|---------------|-----------------|
| - Particular - | | Annual Science and Association | - | | - | All contracts | - Anna Carlotte |

David G. Clark Sec./Tres.

Signature

Date Signed 01/25/19

EPA Form 7520-11 (Rev. 8-01) P-MAX = 1,000

Compliance Review Completed Wims updated Pat to 6: Deine en 32/19

| | ≎EPA |
|---|--------------|
| ١ | Name and Add |
| ı | Gas & Oil M |

| OMB No. 2040-0042 Approval Expires 4/30/07 | | | | | | | | | |
|--|---|---------|------------------|--------------|------------------------------|------------------------|------------------|----------|---------------------------------------|
| Washington, DC 20460 ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT | | | | | | | | | |
| Name and Address of Ex | | PUSAL | ./IIVJE(| 51101 | | | TOTAL CONTRACTOR | ORI | |
| Gas & Oil Manageme | Name and Address of Surface Ow Collins Pine | | | wner | | | | | |
| 80 Dillon Drive Youngsville, PA 16371 RD#2 Kane, PA 16735 | | | | | | | | | |
| Locate Well and O Section Plat - 640 A | State PA | | County Warren | | Permit Number PAS2R998WAR | | | | |
| | Surface Location Description | | | | | | | | |
| | | 7 | 1/4 0 | | 4 of1/4 | | | ownship | Range |
| - | Locate well in two directions from nearest lines of quarter section and drilling unit Surface Location ft. frm (N/S) Line of quarter section and ft. from (E/W) Line of quarter section. | | | | | | | | |
| w | | E | WEL | L ACTIVIT | Y | TYPE OF PERM | VIIT | | |
| | ╌┠╌┼╼┞╌┿╌ | - | F | rine Disp | | Individual | | | |
| | | - | | | Recovery on Storage | ✓ Area Number of We | IIs 2 | | |
| | - | 5 | 45-01 998 | о . же Гй | Jaankin T. | | | F | 400 W 11/10 |
| | 1 1 1 | _ | Leas | e Name P | Algonkin Tru | 181 #3 | Well Nu | mber Lot | 490 Well#18 |
| | S | | | | | | | | |
| | TUBING CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) | | | | | | | | |
| MONTH YEAR | AVERAGE PSIG | MAXIMUM | PSIG | В | BL | MCF | MINIMU | JM PSIG | MAXIMUM PSIG |
| January-2018 | 780 | 830 | | 1 | 50 | 0 | | | |
| February-2018 | 790 | 840 | | 1 | 60 | 0 | | | |
| March-2018 | 780 | 830 | | 1 | 55 | 0 | | | |
| April-2018 | 780 | 850 | | 1 | 50 | 0 | | | |
| May-2018 | May-2018 770 820 | | 0 | | 33 | 0 | | | |
| June-2018 800 840 | | 0 | | 55 0 | | | | | |
| July-2018 | 790 | 840 | | 1 | 50 | 0 | | | |
| August-2018 | 810 | 840 | | 20 | 08 | 0 | | | |
| September-2018 | September-2018 790 830 | | 0 1 | | 171 0 | | | | |
| October-2018 | 810 | 840 | | 2 | 55 | 0 | | | |
| November-2018 800 830 | | 30 1 | | 60 | 0 | | | | |
| December-2018 | 800 | 830 | | 1 | 90 | 0 | | | |
| 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 | | | | | | | | | |
| David G. Clark Sec./Tres. | | | | | | | | | |
| The second secon | Upara (% 11 2 1 | | | 11 1 | MAN | 1 11/11 | | | A A A A A A A A A A A A A A A A A A A |

EPA Form 7520-11 (Rev. 8-01)

P-MAX= 1,000

TOTAL BBLS = 2,097

Compliance Reven Competer wins updated Polf to 6: Drive run 3/21/19