& EPA

United States Environmental Protection Agency

ANNUAL CLASS II DISPOSAL/INJECTION WELL MONITORING REPORT					
Name, Address, Phone and/or Email of Permittee Sammy-Mar, LLC 255 Airport Road Indiana, PA 15701 724-349-7170 dan@dannicenergy.com					
State County					
Pennsylvania			Clearfield		
WELL TYPE	Locate well in two directions from nearest lines of quarter section and drilling unit				
Brine Disposal Enhanced Recovery Hydrocarbon Storage	Surface Location 1/4 of 1/4 of Section 5 Township Huston Range				
	ft. from (N/S) Line of quarter section ft. from (E/W) Line of quarter section.				
Latitude 41.182858 Longitude -78.583278					
Permit or EPA ID Number PAS2D030BCLE API Number 37-033-27257 Full Well Name POVLIK No. 1					
	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING CASING ANNULUS PRESSURE (IF SPECIFIED IN PERMIT)
MONTH, YEAR	MAXIMUM PSIG	BE	L	MCF	MAXIMUM PSIG
JAN-2021	BEDEFOR NO HIS INFORMATION TO THE HIS THE PROPERTY AND A SECOND TO THE S	gradulist and construction on the construction of the construction	Appropriation of the state of t	COLOMBIA TO TO TO A COLOMBIA TO THE PROPERTY OF THE PROPERTY O	Description of the second of t
FEB-2021	A particular construction of the construction				
MAR-2021	Contraction of the contraction o				
APR-2021			and makes by the first of the contract of the		
MAY-2021	O	Parameter and a control of the contr			
JUN-2021	934	34,480		complete that the grant planes and control all planes and control all planes are control and control a	0
JUL-2021	923	71,540	Sign. So.	regional houself program demonstration of the second secon	0
AUG-2021	929	72,756	and the state of t		0
SEP-2021	1,010	77,591	e de la companya de l	one of the state o	0
OCT-2021	1,056	73,400	1009 1009 1009 1009 1009 1009 1009 1009		304
NOV-2021	1,018	77,198			304
DEC-2021	973	73,271	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	The state of the s	282
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 <i>(Pleas</i> Daniel Sinclair President	se type or print)	Signature	anil	funlar	01/28/2022