Approval Expires 12/31/2026

United States Environmental Protection Agency

ANNUAL CLASS II DISPOSAL/INJECTION WELL MONITORING REPORT									
Name, Address, Phone and Bull Run Resources LL 200 Liberty St, STE 20 Warren, PA 16365 Justin@bullrunenergy.c	С			all menerological designation of the section of the	error and a survival or a surv	in and the		acros numbers and across na	and a refine the second
State	AND		200 to 2000 to 2000 to 2000		County	CONTRACTOR STATE	AND	respected a presidente du	Recognitions on a Landon Annia, por the control of
Pennsylvaina	McKean								
WELL TYPE Brine Disposal		Locate well in two directions from nearest lines of quarter section and drilling unit							
Enhanced Recovery	Surface Location 1/4 of 1/4 of Section Township Range								
Hydrocarbon Storage		117 October 104 House 104							
INJECTATE DESCRIPTION ft. from (N/S) Line of quarter section ft. from (E/W) Line of quarter section.									
	Latitude 41.838731				Longitude 78.718667				
Permit or EPA ID Number PAS2R450BMCK			API Number 37-083-55309				Full Well Name Curtis Lot 2		ot 2 L2 #12
	TOTAL VOLUME INJECTED			TUBING CASING ANNULUS PRESSURE (IF SPECIFIED IN PERMIT		ANNULUS PRESSURE			
MONTH, YEAR	MAXIMUM PSIG		BBL		GALLONS		MCF		MAXIMUM PSIG
January-2024	1500	2000		opti picocan semana	84017	-	N/A		N/A
February-2024	1600	2467		in the public of	103606	- Contraction of the Contraction	N/A		N/A
March-2024	1550	2815			118240	The state of the s	N/A Page manufacture of the control		N/A
April-2024	1600	3339		100000000000000000000000000000000000000	140232		N/A		N/A
May-2024	1550	2757			115800		N/A		N/A
June-2024	1550	3240			136100		American companients of the action of the ac		N/A
July-2024	1600	1757		The second secon	73800	N/A			N/A
August-2024	1500	2069			86900	N/A			N/A
September-2024	1475	3321			139500	N/A			N/A
October-2024	1500	3674			154300	The state of the s	N/A		N/A
November-2024	1450	2231		-19404 2042 Program	93700	Sanding of the sandin	N/A		N/A
December-2024	1400	2927			122922	The Later Spinster, Spinst	N/A		N/A
attachments and tha information is true, a	onalty of law that I have p t, based on my Inquiry o accurate, and complete. e and imprisonment. (Re	f those	ally examined a individuals in ware that there	and am	tely responsible for o	obtai	ning the inform	ation, I be	elieve that the
Authorized Signatory and Official Title (Please type or print) Justin Hansen VP-Operations Signature									Date Signed 01/31/25

United States Environmental Protection Agency \$EPA ANNUAL CLASS II DISPOSAL/INJECTION WELL MONITORING REPORT Name, Address, Phone and/or Email of Permittee Bull Run Resources LLC 200 Liberty St, STE 20 Warren, PA 16365 Justin@bullrunenergy.com State County Pennsylvaina McKean **WELL TYPE** Locate well in two directions from nearest lines of quarter section and drilling unit Brine Disposal Surface Location ✓ Enhanced Recovery Range 1/4 of 1/4 of Section Township Hydrocarbon Storage INJECTATE DESCRIPTION ft. from (N/S) Line of quarter section ft. from (E/W) Line of quarter section. Latitude |41.838772 Longitude 78.716258 Permit or EPA ID Number PAS2R450BMCK **API Number** Full Well Name 37-083-55310 Curtis Lot 2 L2 #13 TUBING -- CASING ANNULUS PRESSURE TOTAL VOLUME INJECTED INJECTION PRESSURE (IF SPECIFIED IN PERMIT) MCF MAXIMUM PSIG MONTH, YEAR **MAXIMUM PSIG** BBL GALLONS January-2024 1650 1922 80722 N/A N/A 1600 N/A N/A February-2024 2101 88257 1550 2599 N/A N/A March-2024 109145 1550 2961 N/A N/A April-2024 124357 May-2024 1525 2679 112500 N/A N/A June-2024 3079 N/A 1600 129300 N/A 1475 N/A N/A July-2024 3143 132000 August-2024 1425 2019 84800 N/A N/A September-2024 1475 2029 85200 N/A N/A October-2024 1600 3181 133600 N/A N/A November-2024 1650 2417 101500 N/A N/A December-2024 1600 2119 89012 N/A N/A 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) Authorized Signatory and Official Title (Please type or print) Signature **Date Signed** Justin Hansen VP-Operations 01/31/25