



United States Environmental Protection Agency

ANNUAL CLASS II DISPOSAL/INJECTION WELL MONITORING REPORT

Name, Address, Phone and/or Email of Permittee

Red Jacket Energy, LLC
 7793 Pittsburg Ave. NW
 North Canton, Ohio 44720
 O: 330-494-1221
 C: 330-506-2513

State

Pennsylvania

County

McKean

WELL TYPE

- ☐ Brine Disposal
☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-24929

Full Well Name Brown #1

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	750	630			
February-2024	750	630			
March-2024	750	630			
April-2024	750	630			
May-2024	750	630			
June-2024	750	630			
July-2024	750	630			
August-2024	750	630			
September-2024	750	630			
October-2024	750	630			
November-2024	750	630			
December-2024	750	630			

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)

Todd Suckow
 Authorized Agent

Signature

Date Signed

01/30/25

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WELL TYPE

- ☐ Brine Disposal
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☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-24294

Full Well Name Brown 3

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	0	0			
February-2024	0	0			
March-2024	0	0			
April-2024	0	0			
May-2024	0	0			
June-2024	0	0			
July-2024	0	0			
August-2024	0	0			
September-2024	0	0			
October-2024	0	0			
November-2024	0	0			
December-2024	0	0			

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WELL TYPE

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☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-24930

Full Well Name Brown W 2

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	700	630			
February-2024	700	630			
March-2024	700	630			
April-2024	700	630			
May-2024	700	630			
June-2024	700	630			
July-2024	700	630			
August-2024	700	630			
September-2024	700	630			
October-2024	700	630			
November-2024	700	630			
December-2024	700	630			

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McKean

WELL TYPE

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☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-08654

Full Well Name Brown W 4

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	650	630			
February-2024	650	630			
March-2024	650	630			
April-2024	650	630			
May-2024	650	630			
June-2024	650	630			
July-2024	650	630			
August-2024	650	630			
September-2024	650	630			
October-2024	650	630			
November-2024	650	630			
December-2024	650	630			

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McKean

WELL TYPE

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☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-27643

Full Well Name Brown W 9

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	0	0			
February-2024	0	0			
March-2024	0	0			
April-2024	0	0			
May-2024	0	0			
June-2024	0	0			
July-2024	0	0			
August-2024	0	0			
September-2024	0	0			
October-2024	0	0			
November-2024	0	0			
December-2024	0	0			

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County

McKean

WELL TYPE

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☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-29145

Full Well Name Brown W 13

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING - CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	850	630			
February-2024	850	630			
March-2024	850	630			
April-2024	850	630			
May-2024	850	630			
June-2024	850	630			
July-2024	850	630			
August-2024	850	630			
September-2024	850	630			
October-2024	850	630			
November-2024	850	630			
December-2024	850	630			

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County

McKean

WELL TYPE

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☒ Enhanced Recovery
☐ Hydrocarbon Storage

INJECTATE DESCRIPTION

Locate well in two directions from nearest lines of quarter section and drilling unit

Surface Location

1/4 of 1/4 of Section Township Otto Range

ft. from (N/S) Line of quarter section

ft. from (E/W) Line of quarter section.

Latitude

Longitude

Permit or EPA ID Number

API Number 083-29438

Full Well Name Brown W 14

INJECTION PRESSURE

TOTAL VOLUME INJECTED

TUBING -- CASING
ANNULUS PRESSURE
(IF SPECIFIED IN PERMIT)

MONTH, YEAR	MAXIMUM PSIG	BBL	GALLONS	MCF	MAXIMUM PSIG
January-2024	800	630			
February-2024	800	630			
March-2024	800	630			
April-2024	800	630			
May-2024	800	630			
June-2024	800	630			
July-2024	800	630			
August-2024	800	630			
September-2024	800	630			
October-2024	800	630			
November-2024	800	630			
December-2024	800	630			

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