



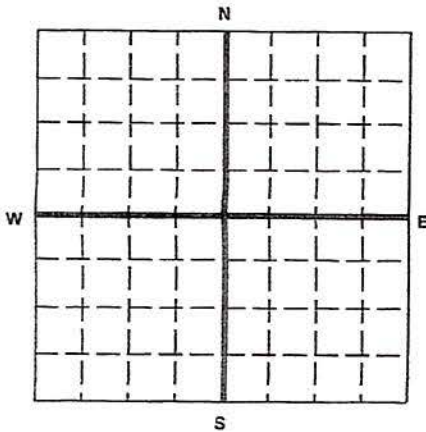
United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee: **J.J. Bucher Prod Corp**
2568 Bells Run Road Shinglehouse PA 16748

Name and Address of Surface Owner: **Deborah ICSS**
Spring City PA

Locate Well and Outline Unit on Section Plat - 640 Acres



State: **PA.** County: **Potter** Permit Number: **PA52R915A POT**

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 ft. frm (N/S) ___ Line of quarter section
 and ft. from (E/W) ___ Line of quarter section.

WELL ACTIVITY: Brine Disposal, Enhanced Recovery, Hydrocarbon Storage
 TYPE OF PERMIT: Individual, Area, Number of Wells: **8**

Lease Name: **Hastings** Well Number: **see attach**

RECEIVED
EPA REGION III
JAN 30 2019
GROUNDWATER & ENFORCEMENT
(3WP22)

| INJECTION PRESSURE | | | | TOTAL VOLUME INJECTED | | TUBING - CASING ANNULUS PRESSURE (OPTIONAL MONITORING) | |
|--------------------|------|--------------|--------------|-----------------------|-----|--|--------------|
| MONTH | YEAR | AVERAGE PSIG | MAXIMUM PSIG | BBL | MCF | MINIMUM PSIG | MAXIMUM PSIG |
| 1 | 18 | 350 | 500 | 50 | | | |
| 2 | 18 | 350 | 500 | 50 | | | |
| 3 | 18 | 0 | 0 | 0 | | | |
| 4 | 18 | 0 | 0 | 0 | | | |
| 5 | 18 | 0 | 0 | 0 | | | |
| 6 | 18 | 0 | 0 | 0 | | | |
| 7 | 18 | 0 | 0 | 0 | | | |
| 8 | 18 | 0 | 0 | 0 | | | |
| 9 | 18 | 0 | 0 | 0 | | | |
| 10 | 18 | 0 | 0 | 0 | | | |
| 11 | 18 | 0 | 0 | 0 | | | |
| 12 | 18 | 0 | 0 | 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): **Gregory A. Maxson Pres.** Signature: **Gregory A. Maxson** Date Signed: **1/31/19**

Total bbls = 100
MAX pressure = 350

Compliance Review Completed
WMS updated
Pdt to G:Drme
RM 2/7/19

J.J. Bucher Prod. Corp.
2568 Bells Run Road
Shinglehouse, Pa. 16748

PA 52 R 915 A POT

well #

| | |
|------|--------------|
| 31 ✓ | 37-105-00562 |
| 32 ✓ | 37-105-00561 |
| 42 ✓ | 37-105-20207 |
| 45 ✓ | 37-105-20320 |
| 49 ✓ | 37-105-20470 |
| 52 ✓ | 37-105-20538 |
| 54 ✓ | 37-105-20540 |
| 57 ✓ | 37-105-20570 |

Inactive & Non Endorsing