

TYPE OR PRINT IN BLUE OR BLACK INK. SEE
RRC WEBSITE FOR FILING INSTRUCTIONS.

RAILROAD COMMISSION OF
TEXAS
OIL AND GAS DIVISION

H-10

Return the completed original report to:
DIRECTOR, Technical Permitting
Oil and Gas Division
P.O. Box 12967
Austin, Texas 78711-2967

**Annual Disposal/Injection
Well Monitoring Report**

RRC USE ONLY
UIC Control No: 000017713
Type: 3
DUE DATE: 08/01/2024

| | | | |
|--|--|--------------------------------------|-----------------------------------|
| 1. OPERATOR NAME, exactly as shown on P-5 KINDER MORGAN PRODUCTION CO LLC | | 2. OPERATOR P-5 NO. 463316 | 3. RRC DISTRICT NO. 08 |
| 4. ADDRESS, including city, state, and zip code 6 DESTA DRIVE STE 6000 MIDLAND, TX 79705 | | | 5. API NO. 42-103-05372 |
| | | | 6. OIL LEASE NO. 20377 |
| 7. FIELD NAME, exactly as shown on Proration Schedule MCELROY | | | 8. GAS ID NO. |
| 9. LEASE NAME, exactly as shown on Proration Schedule NORTH MCELROY UNIT | | 10. COUNTY CRANE | 11. WELL NO. 4557W |

| 12. MONTH YR | 13. INJECTION PRESSURE | | 14. TOTAL VOLUME INJECTED | | 15. ANNULUS PRESSURE (BETWEEN TUBING AND CASING) [See instructions (item B)] | | |
|-----------------|------------------------|----------|---------------------------|-----|--|----------|----------|
| | AVG PSIG | MAX PSIG | BBLs | MCF | # OF READINGS | MIN PSIG | MAX PSIG |
| 07/2023 | 0 | 0 | 0 | 0 | | | |
| 08/2023 | 0 | 0 | 0 | 0 | | | |
| 09/2023 | 0 | 0 | 0 | 0 | | | |
| 10/2023 | 0 | 0 | 0 | 0 | | | |
| 11/2023 | 0 | 0 | 0 | 0 | | | |
| 12/2023 | 0 | 0 | 0 | 0 | | | |
| 01/2024 | 0 | 0 | 0 | 0 | | | |
| 02/2024 | 0 | 0 | 0 | 0 | | | |
| 03/2024 | 0 | 0 | 0 | 0 | | | |
| 04/2024 | 0 | 0 | 0 | 0 | | | |
| 05/2024 | 0 | 0 | 0 | 0 | | | |
| 06/2024 | 0 | 0 | 0 | 0 | | | |

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|--|---|
| 16. Completed Injection Interval (perforated or open hole interval): FROM: 2,898 ft TO: 3,032 ft | 17. Depth of Tubing Packer: 2,847 ft |
|--|---|

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| 18. Are the injected fluids produced from sources other than your own? <input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO | 19. Injection through: <input checked="" type="checkbox"/> 1. Tubing <input type="checkbox"/> 2. Casing |
|--|---|

20. Type of fluids injected during reporting cycle: Total Anthropogenic

A Salt Water _____ % B Fresh Water _____ % C Fracture Water Flow Back _____ % D Norm _____ % E(a) CO2 _____ % E(a) CO2 _____ %

F Natural Gas _____ % G H2S _____ % H Polymer _____ % I Steam _____ % J Air _____ % K Nitrogen _____ %

L Other Fluid _____ % Specify Fluid _____

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|---|---|
| This facsimile H-10 was generated electronically from data submitted to the RRC. A certification of the automated data is available in the RRC's Austin office. | Name of Person: <u>Sandra Hanford</u> Phone: <u>(432)-683-0506</u> |
| | Company: <u>KINDER MORGAN PRODUCTION CO LLC</u> Date: <u>07/31/2024</u> |