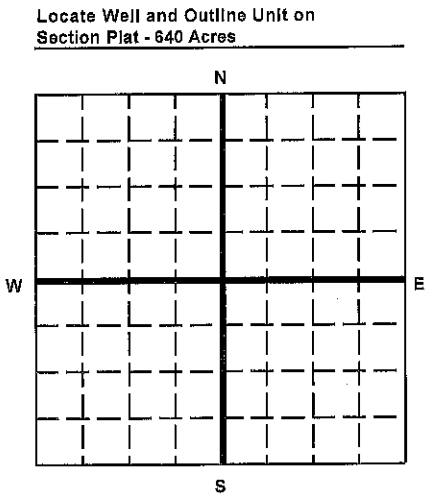




United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells <u>17</u>
Lease Name <u>Saltville</u>		Well Number <u>#6</u>

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
June-2023		274	279	100873			
July-2023		289	299	97008			
August-2023		306	311	99639			
September-2023		303	332	83111			

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) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
---	----------------------	--------------------------------



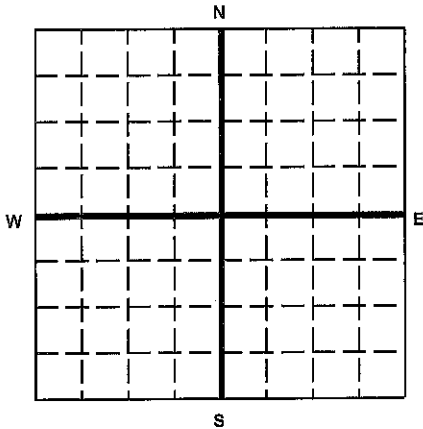
United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee
USC Saltville Brine, LLC
4800 San Felipe, Houston, TX 77056

Name and Address of Surface Owner
USC Saltville Brine, LLC
4800 San Felipe, Houston, TX 77056

Locate Well and Outline Unit on
Section Plat - 640 Acres



State Virginia County Smyth/Washington Permit Number VAS3G931BSMY

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 TYPE OF PERMIT
 Brine Disposal Individual
 Enhanced Recovery Area
 Hydrocarbon Storage Number of Wells: 17

Lease Name Saltville Well Number #4

INJECTION PRESSURE				TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		0	0	0			
May-2023		249	287	43733			
June-2023		13	240	0			
July-2023		4	4	0			
August-2023		4	4	0			
September-2023		5	39	0			

Certification

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Name and Official Title (Please type or print)
Derek Snodgrass, Brine Production Operator

Signature
[Handwritten Signature]

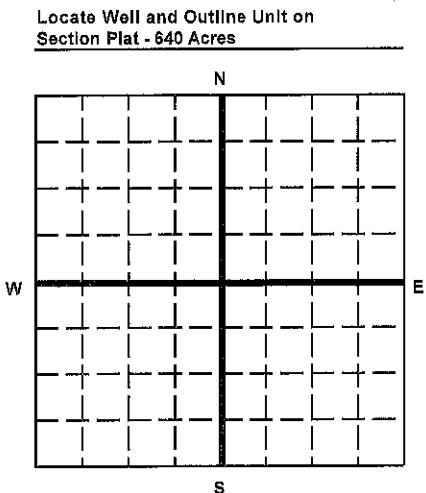
Date Signed
10/04/23



United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
--	---



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: 17
Lease Name: Saltville		Well Number: #15

		INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		200	200	0			
May-2023		200	200	0			
June-2023		200	200	0			
July-2023		200	200	0			
August-2023		200	200	0			
September-2023		200	200	0			

Certification

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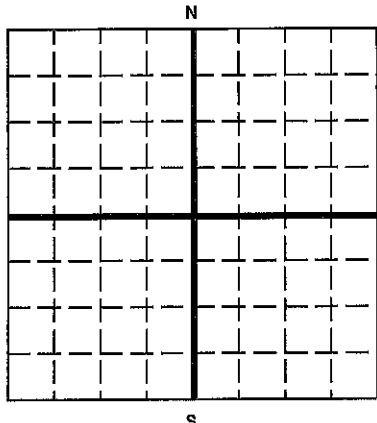
Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

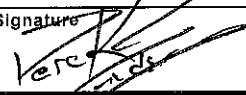
Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres 	State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>	
Lease Name: <u>Saltville</u>		Well Number: <u>#2</u>	

		INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		81	96	0			
May-2023		84	88	0			
June-2023		84	86	0			
July-2023		84	86	0			
August-2023		88	89	0			
September-2023		79	85	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)

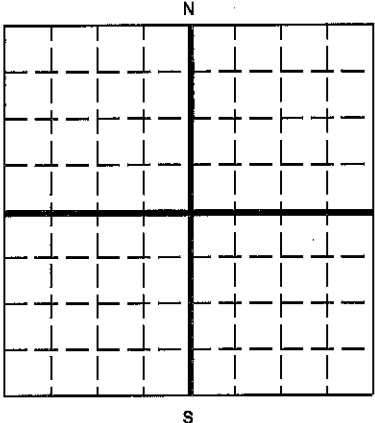
Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

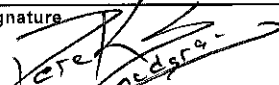
Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
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Locate Well and Outline Unit on Section Plat - 640 Acres 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">State Virginia</td> <td style="width: 25%;">County Smyth/Washington</td> <td style="width: 50%;">Permit Number VAS3G931BSMY</td> </tr> <tr> <td colspan="3">Surface Location Description ___ 1/4 of ___ 1/4 of ___ 1/4 of ___ 1/4 of Section ___ Township ___ Range ___ </td> </tr> <tr> <td colspan="3">Locate well in two directions from nearest lines of quarter section and drilling unit</td> </tr> <tr> <td colspan="3">Surface Location: ___ ft. frm (N/S) ___ Line of quarter section and ___ ft. from (E/W) ___ Line of quarter section.</td> </tr> <tr> <td colspan="2"> WELL ACTIVITY <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage </td> <td> TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u> </td> </tr> <tr> <td colspan="2">Lease Name: Saltville</td> <td>Well Number: #3</td> </tr> </table>	State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY	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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>	Lease Name: Saltville		Well Number: #3
State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY																	
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>																	
Lease Name: Saltville		Well Number: #3																	

		INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		442	499	173916			
May-2023		433	457	222535			
June-2023		432	439	218968			
July-2023		439	449	225325			
August-2023		455	457	242816			
September-2023		430	482	205799			

Certification

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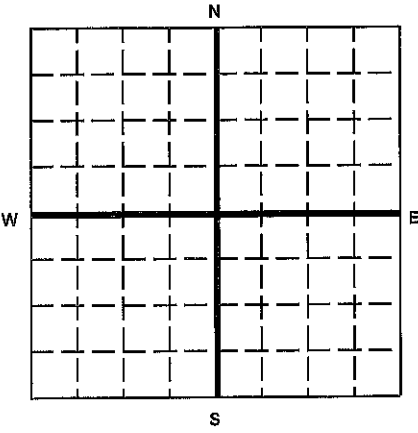
Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

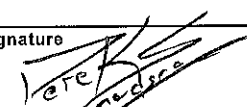
Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres 	State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>	
Lease Name: <u>Saltville</u>		Well Number: <u>#1A</u>	

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		46	56	0			
May-2023		48	51	0			
June-2023		48	49	0			
July-2023		49	50	0			
August-2023		51	52	0			
September-2023		49	52	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)

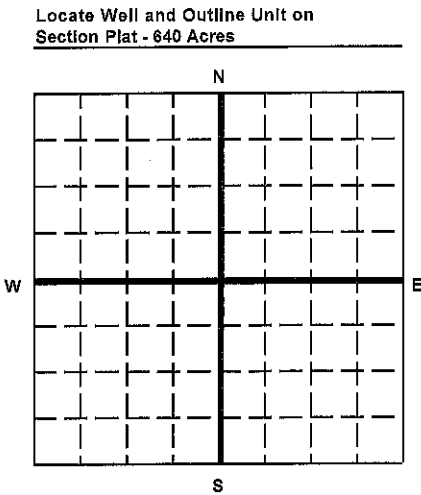
Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>
Lease Name: Saltville		Well Number: #131

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		371	424	115569			
May-2023		371	393	139933			
June-2023		370	376	134876			
July-2023		375	384	137520			
August-2023		385	387	149545			
September-2023		378	388	138239			

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) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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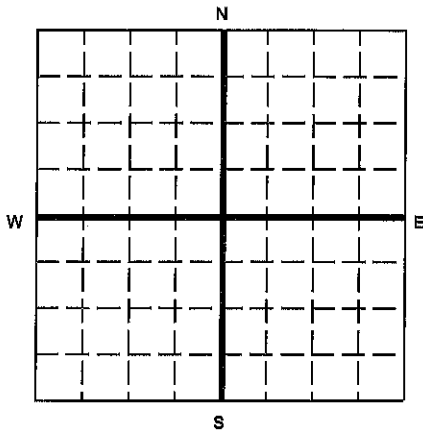


United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>
Lease Name: Saltville		Well Number: #9

INJECTION PRESSURE				TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		410	410	0			
May-2023		410	410	0			
June-2023		410	410	0			
July-2023		410	410	0			
August-2023		410	410	0			
September-2023		410	410	0			

Certification

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Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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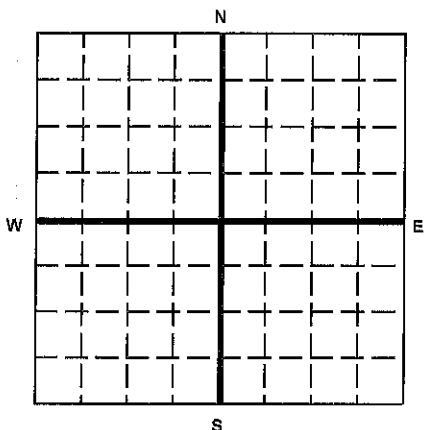
United States Environmental Protection Agency
Washington, DC 20460



ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>
Lease Name: Saltville		Well Number: #17

INJECTION PRESSURE				TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		330	330	0			
May-2023		330	330	0			
June-2023		330	330	0			
July-2023		330	330	0			
August-2023		330	330	0			
September-2023		330	330	0			

Certification

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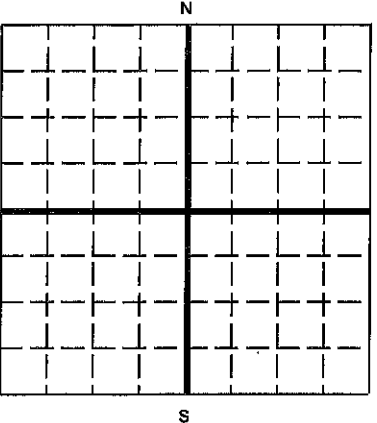
Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres 	State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>	
Lease Name <u>Saltville</u>		Well Number <u>#14A</u>	

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		200	200	0			
May-2023		200	200	0			
June-2023		319	445	0			
July-2023		249	258	0			
August-2023		239	240	0			
September-2023		239	239	0			

Certification

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Name and Official Title (Please type or print) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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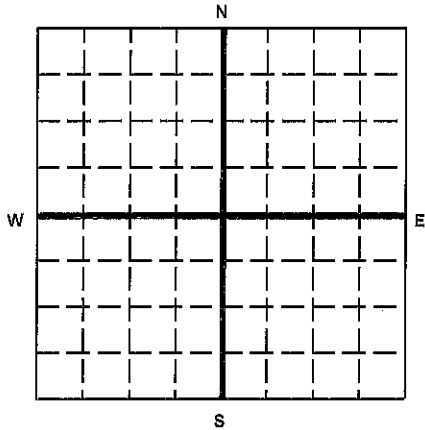


United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056	Name and Address of Surface Owner USC Saltville Brine, LLC 4800 San Felipe, Houston, TX 77056
---	--

Locate Well and Outline Unit on Section Plat - 640 Acres



State Virginia	County Smyth/Washington	Permit Number VAS3G931BSMY
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 <input type="checkbox"/> Brine Disposal <input type="checkbox"/> Enhanced Recovery <input type="checkbox"/> Hydrocarbon Storage		TYPE OF PERMIT <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Area Number of Wells: <u>17</u>
Lease Name: Saltville		Well Number: #13B

		INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
MONTH	YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
April-2023		200	200	0			
May-2023		200	200	0			
June-2023		222	225	0			
July-2023		224	225	0			
August-2023		228	239	142			
September-2023		239	239	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) Derek Snodgrass, Brine Production Operator	Signature 	Date Signed 10/04/23
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