1275492

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 35122
Name: Lakeshore Operating, LLC
Address 1: 13505 S. MUR-LEN RD
Address 2: SUITE 105-182
City: OLATHE State: KS Zip: 66062 + __ __ __ __
Contact Person: Wesley Ketcham
Phone: (773) 754-6242
Lease Name: ORTH
Well Number: 14

API No.: 15-207-21064-00-01
Permit No: E19723.2
Reporting Year: 2015
(January 1 to December 31)

____ - SE - SW - NW Sec. 21 Twp. 25 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
2940 feet from ☐ N / ☑ S Line of Section
4280 feet from ☑ E / ☐ W Line of Section
County: Woodson

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: _____ mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 30 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 5 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0		0		
February	0		0		
March	0		0		
April	60	250	0		30
May	62	250	0		31
June	60	250	0		30
July	62	250	0		31
August	62	250	0		31
September	60	250	0		30
October	62	250	0		31
November	60	250	0		30
December	62	250	0		31
TOTAL	550		0		

Submitted Electronically