1275507

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: Shepard
Well Number: 36-12

API No.: 15-207-28140-00-01
Permit No: E31093.6
Reporting Year: 2015
(January 1 to December 31)

SE - SE - NW - SE Sec. 17 Twp. 24 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
1485 feet from ☐ N / ☑ S Line of Section
1485 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: 750 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 75 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 6 *(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	0		0		
May	0		0		
June	0		0		
July	0		0		
August	900	340	0		18
September	1500	340	0		30
October	1550	340	0		31
November	1500	340	0		30
December	1550	340	0		31
TOTAL	7000		0		

Submitted Electronically