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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 # 3273
Name: HERMAN L. LOEB, LLC
Address 1: PO BOX 838
Address 2:
City: LAWRENCEVILLE State: IL Zip: 62439 + __ __ __ __
Contact Person: Jesse Middagh
Phone: (618) 943-2227
Lease Name: BELCHER B
Well Number: 1

API No.: 15-033-20253-00-01
Permit No: D19574.0
Reporting Year: 2016
(January 1 to December 31)

____ - ____ - SW - SE Sec. 16 Twp. 32 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
659 feet from ☐ N / ☑ S Line of Section
1898 feet from ☑ E / ☐ W Line of Section
County: Comanche

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: 0 psi Injection Zone: SALT PLAIN
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	332	-10	0		31
February	305	-10	0		29
March	347	-10	0		31
April	322	-10	0		30
May	315	-10	0		31
June	297	-10	0		30
July	338	-10	0		31
August	329	-10	0		31
September	312	-10	0		30
October	0		0		
November	0		0		
December	0		0		
TOTAL	2897		0		

Submitted Electronically