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: Shane Pelton
Phone: (620) 617-5870
Lease Name: CHEEK A
Well Number: 1

API No.: 15-071-20304-00-02
Permit No: E26799.10
Reporting Year: 2017
(January 1 to December 31)

____ - NE - NE - SW Sec. 11 Twp. 16 S. R. 43 ☐ E ☑ W
(Q/Q/Q/Q)
2286 feet from ☐ N / ☑ S Line of Section
2976 feet from ☑ E / ☐ W Line of Section
County: Greeley

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: 2000 psi Injection Zone: MORROW
Maximum Authorized Injection Rate: 600 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(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	100	1200	0		1
March	0		0		
April	0		0		
May	80	1400	0		1
June	0		0		
July	0		0		
August	0		0		
September	75	1400	0		1
October	0		0		
November	60	1300	0		1
December	0		0		
TOTAL	315		0		

Submitted Electronically