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 # 31725
Name: Shelby Resources LLC
Address 1: 13949 W COLFAX AVE BLDG 1 STE 120
Address 2:
City: LAKEWOOD State: CO Zip: 80401 + 3248
Contact Person: Chris Gottschalk
Phone: (785) 623-1524
Lease Name: CLARK
Well Number: 3-24

API No.: 15-009-24824-00-03
Permit No: D31557.0
Reporting Year: 2017
(January 1 to December 31)

SE - NE - NW - SW Sec. 24 Twp. 17 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
2178 feet from ☐ N / ☑ S Line of Section
3998 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 1.025 Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	12634	0	0		31
February	11396	0	0		28
March	12634	0	0		31
April	12210	0	0		30
May	12634	0	0		31
June	12210	0	0		30
July	12634	0	0		31
August	123634	0	0		31
September	11863	0	0		30
October	13536	0	0		31
November	13080	0	0		30
December	13536	0	0		31
TOTAL	262001		0		

Submitted Electronically