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: SMOTHERMAN
Well Number: 2-31

API No.: 15-199-20267-00-01
Permit No: E32439.1
Reporting Year: 2018
*(January 1 to December 31)*

____ - NE - NW - SW Sec. 31 Twp. 15 S. R. 41 ☐ E ☑ W
*(Q/Q/Q/Q)*
2308 feet from ☐ N / ☑ S Line of Section
735 feet from ☐ E / ☑ W Line of Section
County: Wallace

**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: 1200 psi Injection Zone: MORROW
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 17 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 7855 | -10 | | | 31 |
| February | 8494 | -15 | | | 28 |
| March | 9793 | -15 | | | 31 |
| April | 10232 | -20 | | | 30 |
| May | 10389 | -15 | | | 31 |
| June | 6438 | -24 | | | 30 |
| July | 6290 | -15 | | | 31 |
| August | 4920 | -15 | | | 31 |
| September | 7042 | -20 | | | 30 |
| October | 6554 | -15 | | | 31 |
| November | 8055 | -15 | | | 30 |
| December | 6704 | -15 | | | 31 |
| ***TOTAL*** | 92766 | | 0 | | |

Submitted Electronically