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: LORRAINE LKC UNIT
Well Number: 2-2

API No.: 15-053-01499-00-01
Permit No: E12162.1
Reporting Year: 2018
(January 1 to December 31)

____ - NW - SW - SW Sec. 12 Twp. 17 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
803 feet from ☐ N / ☑ S Line of Section
5045 feet from ☑ E / ☐ W Line of Section
County: Ellsworth

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: 1500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 1400 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	510	-15			31
February	610	-15			28
March	670	-20			31
April	650	-25			30
May	620	-24			31
June	650	-20			30
July	670	-25			31
August	700	-25			31
September	650	-24			30
October	670	-20			31
November	650	-20			30
December	670	-15			31
TOTAL	7720		0		

Submitted Electronically