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 # 33186
Name: LB Exploration, Inc.
Address 1: 2135 2ND RD
Address 2:
City: HOLYROOD State: KS Zip: 67450 + 9021
Contact Person: Michael Petermann
Phone: (785) 252-8034
Lease Name: SPRAWKA
Well Number: 1-12

API No.: 15-009-23837-00-01
Permit No: D28026.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - NE - NW Sec. 12 Twp. 18 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
4962 feet from ☐ N / ☑ S Line of Section
3684 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: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 500 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	9455	0	0	0	31
February	8540	0	0	0	28
March	9455	0	0	0	31
April	9150	0	0	0	30
May	9455	0	0	0	31
June	9150	0	0	0	30
July	9455	0	0	0	31
August	9455	0	0	0	31
September	9150	0	0	0	30
October	9455	0	0	0	31
November	9150	0	0	0	30
December	9455	0	0	0	31
TOTAL	111325		0		

Submitted Electronically