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 + 0838
Contact Person: Jesse Middagh
Phone: ( 618 ) 943-2227
Lease Name: PAGE A
Well Number: 17

API No.: 15-007-30179-00-00
Permit No: E09123.19
Reporting Year: 2020
*(January 1 to December 31)*

____ - SW - NW - NW Sec. 15 Twp. 33 S. R. 11 ☐ E ☑ W
*(Q/Q/Q/Q)*
4603 feet from ☐ N / ☑ S Line of Section
4903 feet from ☑ E / ☐ W Line of Section
County: Barber

**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: 3000 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 13 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 5993 | 1000 | 0 | | 31 |
| February | 5637 | 1000 | 0 | | 29 |
| March | 6129 | 1000 | 0 | | 31 |
| April | 5879 | 1000 | 0 | | 30 |
| May | 6030 | 1000 | 0 | | 31 |
| June | 5857 | 1000 | 0 | | 30 |
| July | 4466 | 1000 | 0 | | 31 |
| August | 6033 | 1000 | 0 | | 31 |
| September | 5735 | 1000 | 0 | | 30 |
| October | 6545 | 1000 | 0 | | 31 |
| November | 6084 | 1000 | 0 | | 30 |
| December | 6586 | 1000 | 0 | | 31 |
| ***TOTAL*** | 70974 | | 0 | | |

Submitted Electronically