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: 2020
*(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 | 11780 | 0 | 0 | 0 | 31 |
| February | 11020 | 0 | 0 | 0 | 29 |
| March | 11780 | 0 | 0 | 0 | 31 |
| April | 11400 | 0 | 0 | 0 | 30 |
| May | 11780 | 0 | 0 | 0 | 31 |
| June | 11400 | 0 | 0 | 0 | 30 |
| July | 11780 | 0 | 0 | 0 | 31 |
| August | 11780 | 0 | 0 | 0 | 31 |
| September | 11400 | 0 | 0 | 0 | 30 |
| October | 11780 | 0 | 0 | 0 | 31 |
| November | 11400 | 0 | 0 | 0 | 30 |
| December | 11780 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 139080 | | 0 | | |

Submitted Electronically