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: Shane Pelton
Phone: (620) 617-5870
Lease Name: RALSTIN C SWD
Well Number: 2

API No.: 15-097-20295-00-00
Permit No: D17951.0
Reporting Year: 2023
(January 1 to December 31)

____ - ____ - NE - SW Sec. 12 Twp. 28 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
2057 feet from ☐ N / ☑ S Line of Section
3288 feet from ☑ E / ☐ W Line of Section
County: Kiowa

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1500 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	0	0			0
February	0	0			0
March	10120	-15			31
April	8995	-15			30
May	8090	-15			31
June	7320	-20			30
July	5445	-20			31
August	6625	-21			31
September	6478	-15			30
October	7707	-15			31
November	7560	-15			30
December	7611	-15			31
TOTAL	75951		0		

Submitted Electronically