

Form U3C
June 2015
Form must be Typed
Form must be completed
on a per well basis

API No.: _____

Permit No.: _____

Reporting Year: _____
(January 1 to December 31)

_____-_____-_____-_____ Sec. ____ Twp. ____ S. R. ____ ☐ E ☐ W
(000000)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

County: _____

Submitted Electronically

Summary of Changes

Lease Name and Number: SHEPARD 1-11

New Doc ID: 1802588

Parent Doc ID: 1745317

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	01/14/2024	11/12/2024
Maximum Fluid Pressure, April	300	200
Maximum Fluid Pressure, August	300	200
Maximum Fluid Pressure, December	300	200
Maximum Fluid Pressure, February	300	200
Maximum Fluid Pressure, January	300	200
Maximum Fluid Pressure, July	300	200
Maximum Fluid Pressure, June	300	200
Maximum Fluid Pressure, March	300	200
Maximum Fluid Pressure, May	300	200
Maximum Fluid Pressure, November	300	200

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Maximum Fluid Pressure, October	300	200
Maximum Fluid Pressure, September	300	200