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 # 35851
Name: E2 Operating LLC
Address 1: 4200 EAST SKELLY DRIVE
Address 2: SUITE 1000
City: TULSA State: OK Zip: 74135 + ___ ___ ___ ___
Contact Person: VICKIE D HARTER
Phone: (918) 281-5274
Lease Name: SHEPHERD II, H
Well Number: SWD-1

API No.: 15-045-21001-00-01
Permit No: D24986.0
Reporting Year: 2024
(January 1 to December 31)

SW - NW - NW - NE Sec. 13 Twp. 14 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
4924 feet from ☐ N / ☑ S Line of Section
2581 feet from ☑ E / ☐ W Line of Section
County: Douglas

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: 150 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	17	0	0	0	31
February	15	0	0	0	28
March	19	0	0	0	31
April	20	0	0	0	30
May	16	0	0	0	31
June	18	0	0	0	30
July	18	0	0	0	31
August	17	0	0	0	31
September	19	0	0	0	30
October	18	0	0	0	31
November	17	0	0	0	30
December	19	0	0	0	31
TOTAL	213		0		

Submitted Electronically