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: F WALKER SWD
Well Number: 3

API No.: 15-163-21594-00-01
Permit No: D21150.0
Reporting Year: 2025
(January 1 to December 31)

____ - SW - SE - SW Sec. 19 Twp. 7 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
436 feet from ☐ N / ☑ S Line of Section
3574 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 6000 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	31883	0			31
February	28868	0			28
March	31500	0			31
April	31500	0			30
May	32550	0			31
June	31348	0			30
July	32607	0			31
August	32733	0			31
September	30789	0			30
October	32504	0			31
November	31509	0			30
December	32736	0			31
TOTAL	380527		0		

Submitted Electronically