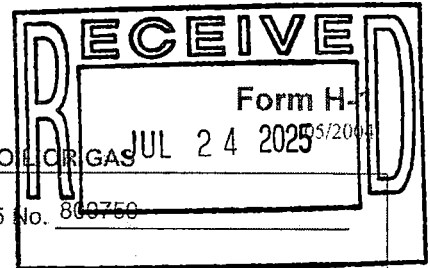


**RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION**



APPLICATION TO INJECT FLUID INTO A RESERVOIR PRODUCTIVE OF OIL OR GAS

1. Operator name SOJOURNER DRILLING CORPORATION 2. Operator P-5 No. 800750
(as shown on P-5, Organization Report)

3. Operator Address PO BOX 3234 ABILENE, TX 79604

4. County FISHER 5. RRC District No. 7B

6. Field Name KEELER-WIMBERLY (CANYON SD.) 7. Field No. 48422500

8. Lease Name HAMLIN UNIT 9. Lease/Gas ID No. 31344

10. Check the Appropriate Boxes: New Project ☐ Amendment ☒

If amendment, Fluid Injection Project No. F- 21466

Reason for Amendment: Add wells ☒ Add or change types of fluids ☐ Change pressure ☐
Change volume ☐ Change interval ☐ Other (explain) _____

RESERVOIR DATA FOR A NEW PROJECT

11. Name of Formation CANYON 12. Lithology SAND
(e.g., dolomite, limestone, sand, etc.)

13. Type of Trap STRATIGRAPHIC 14. Type of Drive during Primary Production GAS SOLUTION/WATER DRIVE
(anticline, fault trap, stratigraphic trap, etc.)

15. Average Pay Thickness 175 16. Use/Unit Acreage 454.24 17. Current Bottom Hole Pressure (psig) 250

18. Average Horizontal Permeability (mds) UNKNOWN 19. Average Porosity (%) 16

INJECTION PROJECT DATA

20. No. of Injection Wells in this application 1

21. Type of Injection Project: Waterflood ☒ Pressure Maintenance ☐ Miscible Displacement ☐ Natural Gas Storage ☐
Steam ☐ Thermal Recovery ☐ Disposal ☐ Other _____

22. If disposal, are fluids from leases other than the lease identified in Item 9? Yes ☐ No ☒

23. Is this application for a Commercial Disposal Well? Yes ☐ No ☒

24. If for commercial disposal, will non-hazardous oil and gas waste other than produced water be disposed? Yes ☐ No ☐

25. Type(s) of Injection Fluid:
Salt Water ☒ Brackish Water ☐ Fresh Water ☐ CO₂ ☐ N₂ ☐ Air ☐ H₂S ☐ LPG ☐ NORM ☐
Natural Gas ☐ Polymer ☐ Other (explain) _____

26. If water other than produced salt water will be injected, identify the source of each type of injection water by formation, or by aquifer and depths, or by name of surface water source:

CERTIFICATE
I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this report, that this report was prepared by me or under my supervision and direction, and that the data and facts stated therein are true, correct, and complete, to the best of my knowledge.

07/22/2025
Date

IVAN GONZALEZ
Signature

Name of Person (type or print)

Phone 325-672-2832 Fax _____

For Office Use Only Register No. Amount \$

RAILROAD COMMISSION OF TEXAS -- OIL AND GAS DIVISION

Form H-1A

INJECTION WELL DATA (attach to Form H-1)

1. Operator Name (as shown on P-5) SOJOURNER DRILLING CORPORATION						2. Operator P-5 No. 800750		
3. Field Name KEELER-WIMBERLY (CANYON SD.)						4. Field No. 48422500		
5. Current Lease Name HAMLIN UNIT						6. Lease/Gas ID No. 31344		
7. Lease is 8 miles in a NORTH direction from MCCAULEY (center of nearest town).								
8. Well No. 26	9. API No. 42-151-33390	10. UIC No.	11. Total Depth 4698	12. Date Drilled 06/26/2025	13. Base of Usable Quality Water (ft) 150			
14. (a) Legal description of well location, including distance and direction from survey lines: 1600' FNL & 1917' FWL, SEC 187, BLK 1, BBB&C RR CO SUR, A-383								
(b) Latitude and Longitude of well location, if known (optional) Lat. 32.890161 Long. -100.188467 NAD27								
15. New Injection Well <input type="checkbox"/> or Injection Well Amendment <input checked="" type="checkbox"/>				Reason for Amendment: Pressure <input type="checkbox"/> Volume <input type="checkbox"/> Interval <input type="checkbox"/> Fluid Type <input type="checkbox"/>				
Other (explain) ADD INJECTION WELL								
Casing	Size	Setting Depth	Hole Size	Casing Weight	Cement Class	# Sacks of Cement	Top of Cement	Top Determined by
16. Surface	8 5/8	163	12 1/4	23#	C	115	0	VISUAL
17. Intermediate								
18. Long string	5 1/2	4695	7 7/8	17#	C/H	670	756	CALCULATION
19. Liner								
20. Tubing size 2 3/8	21. Tubing depth 4150		22. Injection tubing packer depth 4150		23. Injection interval 4200 to 4600			
24. Cement Squeeze Operations (List all)			Squeeze Interval (ft)		No. of Sacks		Top of Cement (ft)	
25. Multiple Completion? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			26. Downhole Water Separation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		NOTE: If the answer is "Yes" to Item 25 or 26, provide a Wellbore Sketch			
27. Fluid Type PRODUCED SALTWATER			28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d) 2000		29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d) 750			
30. Maximum Surface Injection Pressure: for Liquid 2100 psig for Gas _____ psig.								
8. Well No.	9. API No.	10. UIC No.	11. Total Depth	12. Date Drilled	13. Base of Usable Quality Water (ft)			
14. (a) Legal description of well location, including distance and direction from survey lines:								
(b) Latitude and Longitude of well location, if known (optional) Lat. _____ Long. _____								
15. New Injection Well <input type="checkbox"/> or Injection Well Amendment <input type="checkbox"/>				Reason for Amendment: Pressure <input type="checkbox"/> Volume <input type="checkbox"/> Interval <input type="checkbox"/> Fluid Type <input type="checkbox"/>				
Other (explain) _____								
Casing	Size	Setting Depth	Hole Size	Casing Weight	Cement Class	# Sacks of Cement	Top of Cement	Top Determined by
16. Surface								
17. Intermediate								
18. Long string								
19. Liner								
20. Tubing size	21. Tubing depth		22. Injection tubing packer depth		23. Injection interval _____ to _____			
24. Cement Squeeze Operations (List all)			Squeeze Interval (ft)		No. of Sacks		Top of Cement (ft)	
25. Multiple Completion? Yes <input type="checkbox"/> No <input type="checkbox"/>			26. Downhole Water Separation? Yes <input type="checkbox"/> No <input type="checkbox"/>		NOTE: If the answer is "Yes" to Item 25 or 26, provide a Wellbore Sketch			
27. Fluid Type			28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d)		29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d)			
30. Maximum Surface Injection Pressure: for Liquid _____ psig for Gas _____ psig.								