



RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

Form H-1
05/2004

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

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

3. Operator Address P.O. BOX 3234, ABILENE, TX 79604

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

6. Field Name WEST LAKE (CANYON SD.) 7. Field No. 96535500

8. Lease Name TEXACO #1 9. Lease/Gas ID No. 19432

10. Check the Appropriate Boxes: New Project Amendment
If amendment, Fluid Injection Project No. F- _____
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 SAND 12. Lithology SAND
(e.g., dolomite, limestone, sand, etc.)

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

15. Average Pay Thickness 30 16. Lse/Unit Acreage 40 17. Current Bottom Hole Pressure (psig) 860

18. Average Horizontal Permeability (mds) _____ 19. Average Porosity (%) 14

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.

Signature CURTIS PITTMAN Date 05/06/19
Name of Person (type or print) OPERATIONS MANAGER
Phone 325-672-2832 Fax 325-672-0492
CURTIS@SOJODRILLING.COM

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