

**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 L.C.S. Production Company 2. Operator P-5 No. 479574
(as shown on P-5, Organization Report)

3. Operator Address P O Box 6663 Abilene, TX 79608-6663

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

6. Field Name Keeler-Wimberly (Canyon Sd.) 7. Field No. 48422500

8. Lease Name Sojo-Touchstone -A- 9. Lease/Gas ID No. N/A

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, Palo Pinto Reef & Strawn 12. Lithology Sand & Limestone
(e.g., dolomite, limestone, sand, etc.)

13. Type of Trap Stratigraphic & Structural Antiline 14. Type of Drive during Primary Production Solution Gas
(anticline, fault trap, stratigraphic trap, etc.)

15. Average Pay Thickness 32 16. Lse/Unit Acreage 260 17. Current Bottom Hole Pressure (psig) 320

18. Average Horizontal Permeability (mds) 30-50 mds 19. Average Porosity (%) 14% -17 %

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:

Water will be coming from the Canyon Sand

<p align="center">CERTIFICATE</p> <p>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.</p>	<p align="right"><i>Bonnie Burklund</i> <u>08/11/2022</u></p> <p align="right">Signature Date</p>
	<p align="right"><u>Bonnie Burklund (bonnieburklund@gmail.com)</u></p> <p align="right">Name of Person (type or print)</p>
<p>Phone <u>512-799-4057</u> Fax _____</p>	

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) L.C.S. Production Company					2. Operator P-5 No. 479574				
3. Field Name Keeler-Wimberly (Canyon Sd.)					4. Field No. 48422500				
5. Current Lease Name Sojo-Touchstone -A-					6. Lease/Gas ID No. N/A				
7. Lease is 9 miles in a Southeast direction from Sylvester, TX (center of nearest town).									
8. Well No. 4	9. API No. 151-00000	10. UIC No.	11. Total Depth 5,300'	12. Date Drilled To Be Drilled	13. Base of Usable Quality Water (ft) 100'/USDW 600'				
14. (a) Legal description of well location, including distance and direction from survey lines: 2,492' FNWL & 1,263' FSW'lySWL of Sec. 1, Blk 19, T&P RR Co., Abstract 1120									
(b) Latitude and Longitude of well location, if known (optional) Lat. 32.6183085 Long. -100.1673932									
15. New Injection Well <input checked="" 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"/>				
All Information Below is Proposed:					Other (explain) _____				
Casing	Size	Setting Depth	Hole Size	Casing Weight	Cement Class	# Sacks of Cement	Top of Cement	Top Determined by	
16. Surface	8-5/8"	140'	12-1/4"	24#	C	145	Surface	Circulation	
17. Intermediate									
18. Long string	4-1/2"	5,200'	7-7/8"	10.6#	C	375	3,600'	Calculation	
19. Line DV Tool	4-1/2"	5,200'	7-7/8"	10.6#	C&C Lite	550	Surface	Circulation	
20. Tubing size 2-3/8"	21. Tubing depth 3,900'		22. Injection tubing packer depth 3,900'			23. Injection interval 4,000' to 5,200'			
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 Salt Water			28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d) 2,000 bpd			29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d) 500 bpd			
30. Maximum Surface Injection Pressure: for Liquid 2,000 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.									