

**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 LAINCO, INC. (as shown on P-5, Organization Report) 2. Operator P-5 No. 482345  
 3. Operator Address P.O. Box 339, HAMPTON, TX 77520  
 4. County FISHER 5. RRC District No. 7B  
 6. Field Name Kovach - W. Liberty (LAINCO) 7. Field No. 48422500  
 8. Lease Name Hess 9. Lease/Gas ID No. 30243

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 12. Lithology SAND  
 13. Type of Trap STRATIGRAPHIC (anticline, fault trap, stratigraphic trap, etc.) 14. Type of Drive during Primary Production SOLUTION GAS  
 15. Average Pay Thickness 32 16. Lse/Unit Acreage 160 17. Current Bottom Hole Pressure (psig) 340  
 18. Average Horizontal Permeability (mds) 15 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  CO<sub>2</sub>  N<sub>2</sub>  Air  H<sub>2</sub>S  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.

6-15-17  
 Signature [Signature]  
 Name of Person (type or print) JOSHUA LAINCO  
 Phone 325-721-5502 Fax \_\_\_\_\_  
**FILED FOR RECORD**  
**AT 12 O'CLOCK P.M.**  
**JUN 21 2017**

For Office Use Only Register No. Amount \$

See Reverse Side for Required Attachments

PAT THOMSON  
 COUNTY CLERK FISHER COUNTY, TEXAS  
 BY [Signature] DEPUTY

RAILROAD COMMISSION OF TEXAS -- OIL AND GAS DIVISION

05/2004

Form H-1A

INJECTION WELL DATA (attach to Form H-1)

1. Operator Name (as shown on P-5) <u>LATCO, Inc.</u>						2. Operator P-5 No. <u>482345</u>		
3. Field Name <u>Kroger - Kimberly (Angou, J)</u>						4. Field No. <u>48422500</u>		
5. Current Lease Name <u>Hess</u>						6. Lease/Gas ID No. <u>30243</u>		
7. Lease is <u>8</u> miles in a <u>Northerly</u> direction from <u>M. Couley</u> (center of nearest town).								
8. Well No. <u>7</u>	9. API No. <u>42-151-32852</u>	10. UIC No.	11. Total Depth <u>4330'</u>	12. Date Drilled <u>8-18-2011</u>	13. Base of Usable Quality Water (ft) <u>50'</u>			
14. (a) Legal description of well location, including distance and direction from survey lines: <u>2014' ECL. 100' FSL. Sec 20C. T12N. R12E. C.</u>								
(b) Latitude and Longitude of well location, if known (optional) Lat. <u>32.89852°</u> Long. <u>-100.21597</u>								
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"/>					
Other (explain) _____								
Casing	Size	Setting Depth	Hole Size	Casing Weight	Cement Class	# Sacks of Cement	Top of Cement	Top Determined by
16. Surface	<u>2-7/8"</u>	<u>178'</u>	<u>2-5/8"</u>	<u>34</u>	<u>C</u>	<u>115</u>	<u>Surface</u>	<u>Grout plug</u>
17. Intermediate								
18. Long string	<u>4-1/2"</u>	<u>4512'</u>	<u>7-7/8"</u>	<u>115</u>	<u>C</u>	<u>800</u>	<u>500'</u>	<u>CDL</u>
19. Liner								
20. Tubing size <u>2-3/8"</u>	21. Tubing depth <u>4330'</u>		22. Injection tubing packer depth <u>4330'</u>			23. Injection interval <u>4335'</u> to <u>4381'</u>		
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 <u>SALT WATER</u>			28. Maximum daily injection volume for each fluid type (rate in bpd or mcf/d) <u>1500</u>		29. Estimated average daily injection volume for each fluid type (rate in bpd or mcf/d) <u>500</u>			
30. Maximum Surface Injection Pressure: for Liquid <u>2000</u> 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.								