

TYPE OR PRINT IN BLUE OR BLACK INK
READ INSTRUCTIONS ON REVERSE SIDE

RAILROAD COMMISSION OF
TEXAS
OIL AND GAS DIVISION

H-10
rev. 7/95

Return the completed original report to:
DIRECTOR, Environmental Services
Oil and Gas Division
Railroad Commission of Texas
P.O. Box 12967
Austin, Texas 78711-2967

Annual Disposal/Injection
Well Monitoring Report

RRC USE ONLY
UIC Control No. 000016317
Type: 3
Effective Date: 09/01/2010

DATE DUE: AUGUST 1, 2010

Check box if H-10 is being filed with W-2 or G-1

| | | | | | |
|---|--|--------------------------------------|--|-----------------------------------|--|
| 1. OPERATOR NAME, exactly as shown on P-5, Organization Report RESACA OPERATING COMPANY | | 2. OPERATOR P-5 NO. 703238 | | 3. RRC DISTRICT NO. 08 | |
| 4. ADDRESS, including city, state, and zip code 1331 LAMAR STREET STE 1450 HOUSTON TX 77010 | | | | 5. API NO. 42-135-30743 | |
| | | | | 6. OIL LEASE NO. 20650 | |
| 7. FIELD NAME, exactly as shown on Proration Schedule JORDAN | | | | 8. GAS ID NO. | |
| 9. LEASE NAME, exactly as shown on Proration Schedule JORDAN / SAN ANDRES / UNIT | | 10. COUNTY ECTOR | | 11. WELL NO. *7909W * | |

| MONTH | YR | 13. INJECTION PRESSURE | | 14. TOTAL VOLUME INJECTED | | 15. ANNULUS PRESSURE (BETWEEN TUBING AND CASING) [See instructions (Item B)] | | |
|---------|----|------------------------|-----------|---------------------------|-----|--|-----------|-----------|
| | | AVG. PSIG | MAX. PSIG | BBLS | MCF | # OF READINGS | MIN. PSIG | MAX. PSIG |
| 07/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 08/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 09/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 10/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 11/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 12/2009 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 01/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 02/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 03/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 04/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 05/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |
| 06/2010 | | 0 | 0 | 0 | 0 | 5 | 0 | 0 |

16. Current Injection Interval: FROM: **3390** ft. TO: **3718** ft. 17. Depth of Tubing Packer: **3314** ft.

18. Are the injected fluids produced from sources other than your own? ☐ 1. YES ☒ 2. NO 19. Injection through: ☒ 1. Tubing ☐ 2. Casing

20. Type of fluids injected during reporting cycle: ☒ 1. Salt Water ☐ 2. Fresh Water ☐ 3. Brackish Water ☐ 4. Air
☐ 5. Natural Gas ☐ 6. CO2 ☐ 7. Polymer ☐ 8. NORM ☐ 9. Other (specify) _____

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 data and facts stated herein are true, correct, and complete, to the best of my knowledge.

Signature Melanie Reyes
Name of Person (type or print) Melanie Reyes Phone (432) 580-8500
Title Engineer Assistant Date 7-21-10