



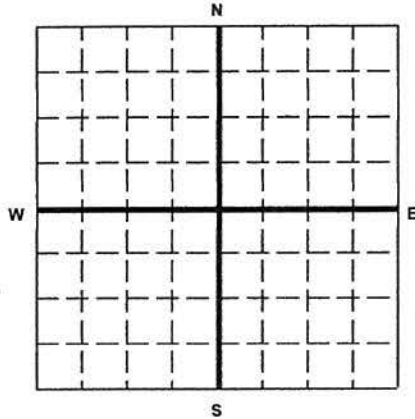
United States Environmental Protection Agency
Washington, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

Name and Address of Existing Permittee
Stonehaven Energy LLC
Po Box 941811
Houston TX 77004

Name and Address of Surface Owner
Stonehaven Energy LLC
Po Box 941811
Houston TX 77004

Locate Well and Outline Unit on
Section Plat - 640 Acres



State
PA

County
Venango

Permit Number
PASD2010BVEN

Surface Location Description
____ 1/4 of ____ 1/4 of ____ 1/4 of ____ 1/4 of Section ____ Township Range

Locate well in two directions from nearest lines of quarter section and drilling unit
Surface
Location ft. frm (N/S) ____ Line of quarter section
and ft. from (E/W) ____ Line of quarter section.

WELL ACTIVITY	TYPE OF PERMIT
<input checked="" type="checkbox"/> Brine Disposal	<input checked="" type="checkbox"/> Individual
<input type="checkbox"/> Enhanced Recovery	<input type="checkbox"/> Area
<input type="checkbox"/> Hydrocarbon Storage	Number of Wells <u>1</u>

Lease Name Latshaw Well Number 9

MONTH	YEAR	INJECTION PRESSURE		TOTAL VOLUME INJECTED		TUBING -- CASING ANNULUS PRESSURE (OPTIONAL MONITORING)	
		AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG
January	2019	800	1280	546	0	0	0
February	2019	1220	1250	756	0	0	0
March	2019	950	1300	670	0	0	0
April	2019	1000	1250	1181	0	0	0
May	2019	1175	1250	915	0	0	0
June	2019	1150	1250	749	0	0	0
July	2019	1100	1275	842	0	0	0
August	2019	1175	1200	938	0	0	0
September	2019	1175	1250	1003	0	0	0
October	2019	1100	1250	1285	0	0	0
November	2019	1100	1325	624	0	0	0
December	2019	1280	1320	1306	0	0	0

Certification

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32)

Name and Official Title (Please type or print)
Scott Goldthwaite Operation Manager

Signature
Scott Goldthwaite

Date Signed
01/22/2020