

Annual Report of Monthly Injection

For the Year 2013

Form 6

To the Minister of Natural Resources

v.2009-05-31

Operator: LONNIE BARNES	Tel. # 519-834-2339 Fax #519-834-2155
Address: BOX 242, OIL SPRINGS, ON NON 1P0	

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name: BARNES FW #1-19	Source Pool: RAIN WATER, WATER WELL
Township: ENNISKILLEN	Source Formation: 248'
Lot 18 Concession 1 & 2	Injection Fluid Type: FRESH WATER
Well Licence No.: SEE ATTACHED LIST	Injection Formation: DETROIT RIVER GROUP
Well Status - Mode*: ACT	Injection Pool: OIL SPRINGS POOL IN PARTS OF
Injection Permit No.: 2009-1	LOT 18, CON 1 & 2, ENNISKILLEN TOWNSHIP

* As of Dec. 31 - active, suspended, abandoned, potential

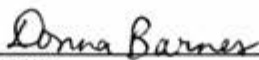
Description of fluid treatment prior to injection: SETTLING IN POND

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan	246.45	5756.92 (400 PSI)	31
Feb	222.60		28
Mar	246.45		31
April	238.50		30
May	246.45		31
June	238.50		30
July	246.45		31
Aug	246.45		31
Sep	238.50		30
Oct	246.45		31
Nov	238.50		30
Dec	246.45		31
Total	2901.75		365



The undersigned certifies that the information provided herein is complete and accurate and he/she has authority to bind the operator.

 DONNA BARNES
 Name (print)


 Signature

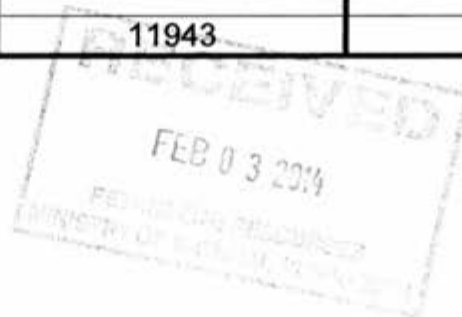
 BARNES OIL SPRINGS
 Company

 BOOKEEPER
 Title

 18/01/14
 Date (day/month/year)

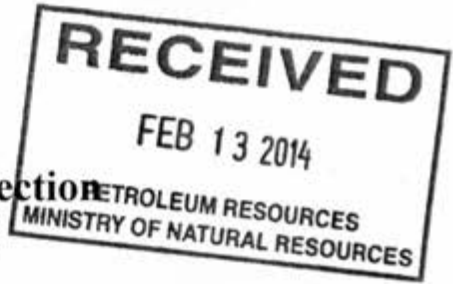
INJECTION WELLS
BARNES OIL SPRINGS

WELL NAME	WELL LICENCE #	MODE
BARNES FW #1, ENNISKILLEN-18-2	T010215	ACT
BARNES FW #2, ENNISKILLEN-18-2	T010216	ACT
BARNES FW #3, ENNISKILLEN-18-2	T010217	SUS
BARNES FW #4, ENNISKILLEN-18-2	T010218	SUS
BARNES FW #5, ENNISKILLEN-18-2	T010219	ACT
BARNES FW #6, ENNISKILLEN-18-2	T010220	ACT
BARNES FW #7, ENNISKILLEN-18-2	T010221	SUS
BARNES FW #8, ENNISKILLEN-18-2	T010179	ACT
BARNES FW #9, ENNISKILLEN-18-2	T010180	SUS
BARNES FW #10, ENNISKILLEN-18-2	T010181	SUS
BARNES FW #11, ENNISKILLEN-18-2	T010253	ACT
BARNES FW #12, ENNISKILLEN-18-1	T010182	ACT
BARNES FW #13, ENNISKILLEN-18-1	T010183	ACT
BARNES FW #14, ENNISKILLEN-18-1	T010184	SUS
BARNES FW #15, ENNISKILLEN-18-1	T010185	SUS
BARNES FW #16, ENNISKILLEN-18-1	T010186	SUS
BARNES FW #17, ENNISKILLEN-18-1	T010187	ACT
BARNES FW #18, ENNISKILLEN-18-1	T010188	ACT
BARNES FW #19, ENNISKILLEN-18-1	11943	SUS





Annual Report of Monthly **Injection**
for the year 2013



Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304	Fax # (519) 657-3633
Address P.O. Box 20109, 431 Boler Rd		
London, Ontario N6k 4G6		

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name: Imperial Union Grand Bend #2	Source Pool: Grand Bend
Township: McGillivray	Source Formation: Guelph
Tract Lot 41 Concession NB	Fluid Type: Salt water
Well Licence #: F011756	Injection Formation: Guelph
Well Status - Mode*: Active	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

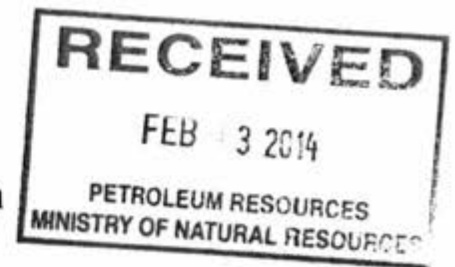
Description of fluid treatment prior to injection:

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	1,986	-0-	31	64.07
Feb	1,530	-0-	28	54.65
Mar	2,094	-0-	31	67.55
April	700	-0-	30	23.34
May	456	-0-	31	14.71
June	497	-0-	30	16.57
July	389	-0-	31	12.55
Aug	540	-0-	31	17.42
Sep	665	-0-	30	22.17
Oct	1,106	-0-	31	35.68
Nov	1,240	-0-	30	41.34
Dec	1,668	-0-	31	53.81
Total	12,871		365	35.27

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Allan Cook	Date: February 01, 2014
Signature:	Manager

Annual Report of Monthly Injection for the year 2013



Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304 Fax # (519) 657-3633
Address P.O. Box 20109, 431 Boler Rd	
London, Ontario N6K 4G6	

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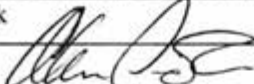
Well Name: Imperial Union Grand Bend #6	Source Pool: Grand Bend
Township: McGillivray	Source Formation: Guelph
Tract Lot 41 Concession NB	Fluid Type: Salt water
Well Licence #: 1063	Injection Formation: Guelph
Well Status - Mode*: Active	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:
--

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	1,335	-0-	31	43.07
Feb	1,143	-0-	28	40.83
Mar	1,786	-0-	31	57.62
April	1,839	-0-	30	61.30
May	1,430	-0-	31	46.13
June	1,164	-0-	30	38.80
July	961	-0-	31	31.00
Aug	1,163	-0-	31	37.52
Sep	853	-0-	30	28.44
Oct	876	-0-	31	28.26
Nov	928	-0-	30	30.94
Dec	1,335	-0-	31	43.07
Total	14,713		365	40.31

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Allan Cook	Date: February 01, 2014
Signature: 	President



Annual Report of Monthly Injection for the year 2013



Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304 Fax # (519) 657-3633
Address P.O. Box 20109, 431 Boler Rd	
London, Ontario N6K 4G6	

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name: Robert McMaster & Sons – Gobles 2	Source Pool: Gobles
Township: Blenheim	Source Formation:
Tract Lot 19 Concession 1	Fluid Type:
Well Licence #: 141	Injection Formation:
Well Status - Mode*: Suspended	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:
--

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	NIL	NIL	NIL	NIL
Feb				
Mar				
April				
May				
June				
July				
Aug				
Sep				
Oct				
Nov				
Dec				
Total	↓	↓	↓	↓

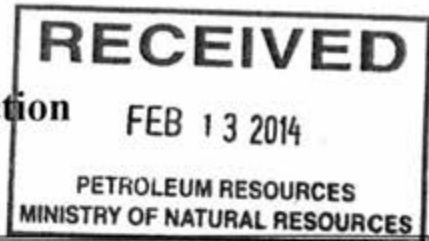
The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Allan Cook	Date: February 01, 2014
Signature:	Manager





Annual Report of Monthly **Injection**
for the year 2013



Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304	Fax # (519) 657-3633
Address P.O. Box 20109, 431 Boler Rd		
London, Ontario N6K 4G6		

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name: Robert McMaster & Sons – Gobles 4	Source Pool: Gobles
Township: Blenheim	Source Formation:
Tract Lot 22 Concession 1	Fluid Type:
Well Licence #: 149	Injection Formation:
Well Status - Mode*: Suspended	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

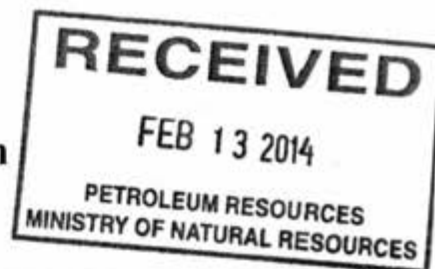
Description of fluid treatment prior to injection:

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	NIL	NIL	NIL	NIL
Feb				
Mar				
April				
May				
June				
July				
Aug				
Sep				
Oct				
Nov				
Dec				
Total	↓	↓	↓	↓

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Name: Allan Cook	Date: February 01, 2014
Signature:	Manager

Annual Report of Monthly Injection
 for the year 2013



Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304	Fax # (519) 647-3633
Address P.O. Box 20109, 431 Boler Rd		
London, Ontario N6K 4G6		

This form only applies to fluid injection for secondary recovery.

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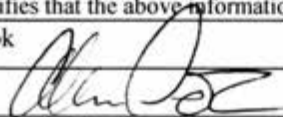
Well Name: Robert McMaster & Sons – Gobles 7	Source Pool: Gobles
Township: Blenheim	Source Formation:
Tract 3 Lot 19 Concession 1	Fluid Type:
Well Licence #: 1025	Injection Formation:
Well Status - Mode*: Suspended	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	NIL	NIL	NIL	NIL
Feb				
Mar				
April				
May				
June				
July				
Aug				
Sep				
Oct				
Nov				
Dec				
Total	↓	↓	↓	↓

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Allan Cook	Date: February 01, 2014
Signature: 	Manager

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 PETROLEUM RESOURCES
 MINISTRY OF NATURAL RESOURCES

Annual Report of Monthly **Injection** for the year 2013

Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304 Fax # (519) 647-3633
Address P.O. Box 20109, 431 Boler Rd	
London, Ontario N6K 4G6	

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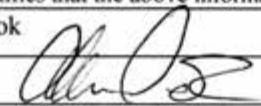
Well Name: McMaster - Gobles 20	Source Pool: Gobles
Township: Blenheim	Source Formation:
Tract 7 Lot 16 Concession 1	Fluid Type:
Well Licence #: 1287	Injection Formation:
Well Status - Mode*: Suspended	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	NIL	NIL	NIL	NIL
Feb				
Mar				
April				
May				
June				
July				
Aug				
Sep				
Oct				
Nov				
Dec				
Total	↓	↓	↓	↓

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Name: Allan Cook	Date: February 01, 2014
Signature: 	Manager



Annual Report of Monthly Injection for the year 2013

Form 6 To: the Minister of Natural Resources

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304 Fax # (519) 657-3633
Address P.O. Box 20109, 431 Boler Rd	
London, Ontario N6K 4G6	

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name: Imperial Kewanee - Gobles 45	Source Pool: Gobles
Township: Blenheim	Source Formation:
Tract 3 Lot 7 Concession 1	Fluid Type:
Well Licence #: 1719	Injection Formation:
Well Status - Mode*: Suspended	Injection Pool:
Injection Permit #:	

* As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m ³ /day)
Jan	NIL	NIL	NIL	NIL
Feb				
Mar				
April				
May				
June				
July				
Aug				
Sep				
Oct				
Nov				
Dec				
Total	↓	↓	↓	↓

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Allan Cook	Date: February 01, 2014
Signature:	President





Oil, Gas and Salt Resources Act
**Annual Report of
 Monthly Injection**

For the Year 2013

Form 6

To the Minister of Natural Resources

v.2009-05-31

Operator <u>FAIRBANK OIL</u>	Tel. # <u>887-0230</u> Fax # <u>887-3363</u>
Address <u>Box 10, Petrohia</u>	

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name <u>MORNING STAR</u>	Source Pool <u>OIL SPRINGS</u>
Township <u>ENNISKILLEN</u>	Source Formation <u>DEWITT</u>
Lot <u>19</u> Concession <u>II</u>	Injection Fluid Type <u>PRODUCED WATER</u>
Well Licence No.	Injection Formation <u>DEWITT</u>
Well Status - Mode*	Injection Pool <u>OIL SPRINGS</u>
Injection Permit No.	

* As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan			
Feb			
Mar			
April			
May			
June			
July			
Aug			
Sep			
Oct			
Nov			
Dec			
Total			

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 FEB 18 2014
 PETROLEUM RESOURCES
 MINISTRY OF NATURAL RESOURCES

The undersigned certifies that the information provided herein is complete and accurate and he/she has authority to bind the operator.

C.O. FAIRBANK
 Name (print)
FAIRBANK OIL
 Company
FEB 14 / 14
 Date (day/month/year)

[Signature]
 Signature

 Title

**Annual Report of
Monthly Injection****For the Year 2013**Form 6
31

To the Minister of Natural Resources

v.2009-05-

Operator	LIBERTY OIL & GAS LTD.	Tel. # (403) 229-2968 Fax # (403) 229-2978
Address	Suite # 209, 1324 - 11 th Avenue SW, Calgary, AB T3C 0M6	

This form only applies to fluid injection for secondary recovery.

All injection wells must be reported and all injection must be reported. If space is insufficient attach additional forms.

Well Name	PPC/Ram 31	Source Pool	Dover 7-5-V E (Dover East)
Township	Dover	Source Formation	Ordovician TRBR
Tract 3 Lot	6 Concession IV E	Injection Fluid Type	Formation Water (brine)
Well Licence No.	T007802	Injection Formation	Ordovician Black River Group
Well Status - Mode*	INJ - active	Injection Pool	Dover 7-5-V E (Dover East)
Injection Permit No.	2007 - 1		

* As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection
NONE

Month	Volume Injected (m ³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan	387.28	0	11
Feb	343.41	0	11
Mar	335.50	0	11
April	322.00	0	9
May	448.72	0	17
June	332.25	0	12
July	457.17	0	13
Aug	438.02	0	14
Sep	446.17	0	14
Oct	510.86	0	17
Nov	370.10	0	14
Dec	412.25	0	16
Total	4803.73	0	159

The undersigned certifies that the information provided herein is complete and accurate and he/she has authority to bind the operator.

MORLEY SALMON

Name (print)

Signature

LIBERTY OIL & GAS LTD.

Company

Director

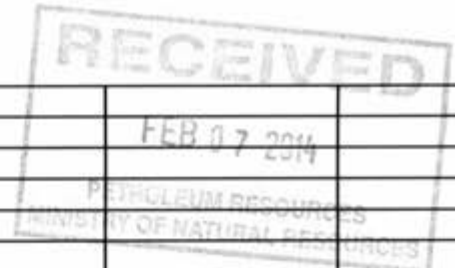
Title

10/02/2014

Date (day/month/year)



Ministry of Natural Resources / Ministère des Richesses naturelles



Oil, Gas and Salt Resources Act

Annual Report of Monthly Injection

For the year 2013

Form 6 To: the Minister of Natural Resources

Operator: ON-ENERGY CORP. Tel. # 519-695-3811 Fax # 519-695-3852

Address: 185 McEwan St., Bothwell, ON N0P 1C0

Well Name: Rodney Unit 3 Source Pool: Basal
 Township: Aldborough Source Formation: Glacial Gravel/Sand
 Tract Lot Concession Fluid Type: Fresh Water
 Well Licence # Injection Formation: Dundee
 Well Status - Mode*: Injection Pool: Rodney R & R Unit 3
 Injection Permit #:

* As of Dec 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:

No Treatment

Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
January	488.0	226	31	15.7
February	443.3	225	28	15.3
March	490.1	230	31	15.8
April	472.3	230	30	15.7
May	468.2	223	31	15.1
June	448.2	230	30	14.9
July	470.3	224	31	15.2
August	475.5	237	31	15.8
September	460.3	231	30	15.9
October	614.4	230	31	19.8
November	459.1	230	30	15.3
December	287.2	137	19	15.1
Total	5,576.9		353	

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

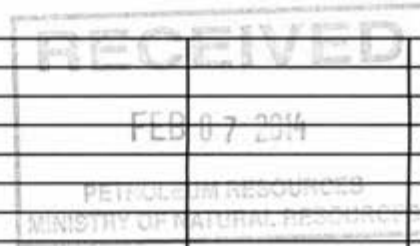
Name: Jane Lowrie Date: 15-Feb-14

Signature:  Position Held: President





Ministry of Natural Resources
Ministère des Richesses naturelles



Oil, Gas and Salt Resources Act
Annual Report of Monthly Injection
For the year 2013

Form 6 To: the Minister of Natural Resources
Operator: ON-ENERGY CORP. Tel. # 519-695-3811 Fax # 519-695-3852
Address: 185 McEwan St., Bothwell, ON N0P 1C0

Well Name: Rodney South Unit Source Pool: Rodney Unit 3, Rodney South Unit
Township: Aldborough Source Formation: Dundee
Tract Lot D Concession VII Fluid Type: Recovered formation and injection waters
Well Licence # Injection Formation: Dundee
Well Status - Mode*: Injection Pool: Rodney South Unit
Injection Permit 2008-1

* As of Dec 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection: Filtration

Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
January	-	-	0	-
February	-	-	0	-
March	-	-	0	-
April	-	-	0	-
May	-	-	0	-
June	-	-	0	-
July	-	-	0	-
August	-	-	0	-
September	-	-	0	-
October	-	-	0	-
November	-	-	0	-
December	-	-	0	-
Total	-	-	-	-

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Jane Lowrie Date: 15-Feb-14

Signature:  Position Held: President



Oil, Gas and Salt Resources Act
Annual Report of Monthly Injection
For the year 2013

Form 6 To: the Minister of Natural Resources

Operator:	Pintail Production Inc.	Tel. #	472-1542	Fax #	472-9434
Address:	22687 Jury Rd, RR #3, Komoka, ON, N0L 1R0				

Well Name:	Bluewater True Fitzgerald	Source Pool:	Plympton 5-19-VI
Township:	Plympton	Source Formation:	Guelph
Tract:	3	Fluid Type:	Formation brine
Lot:	20	Injection Formation:	Guelph
Concession:	VI	Injection Pool:	Plympton 5-19-VI
Well Licence #	T005393		
Well Status - Mode*:	Inj - ACT		
Injection Permit #:	2001-1		

* As of Dec 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:
Addition of oxygen scavanger, scale inhibitor. Water is filtered

Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
Jan	948	0	31	30.6
Feb	887	0	26	34.1
Mar	966	0	31	31.2
April	933	0	30	31.1
May	722	0	24	30.1
June	751	0	24	31.3
July	963	0	30	32.1
Aug	1,043	0	31	33.7
Sept	968	0	30	32.3
Oct	1,050	0	30	35.0
Nov	1,028	0	30	34.3
Dec	1,027	0	30	34.2
Total	11285.48			

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name:	Claudia Cochrane	DATE:	Feb 15, 2014
Signature:		Position Held:	Secretary



Oil, Gas and Salt Resources Act
Annual Report of Monthly Injection
For the year 2013

Form 6 To: the Minister of Natural Resources

Operator:	Roth & Roth Limited	Tel. #	472-1542	Fax #	472-9434
Address:	22687 Jury Rd, RR #3, Komoka, ON, N0L 1R0				

Well Name:	Roth & Roth 4 Johnson 1 Enn 31-XIV	Source Pool:	Brine ponds, Provident Energy, Production
Township:	Enniskillen	Source Formation:	Salina B Salt, Guelph
Tract:	3	Fluid Type:	Cavern washing brine, production
Lot:	31	Injection Formation:	Guelph
Concession:	XIV	Injection Pool:	Wanstead
Well Licence #	T008571		
Well Status - Mode*:	Inj - ACT		
Injection Permit #:	2001-2		

* As of Dec 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:
Addition of oxygen scavanger, scale inhibitor. Water is filtered

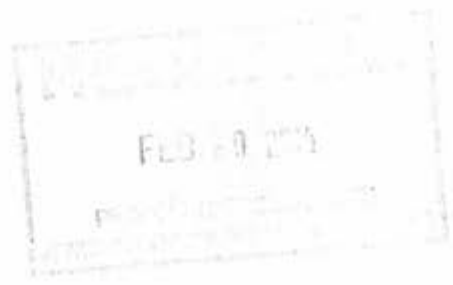
Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
Jan	1,506	0	31	48.6
Feb	1,285	0	28	45.9
Mar	609	0	31	19.7
April	474	0	30	15.8
May	1,323	0	31	42.7
June	1,113	0	30	37.1
July	1,165	0	31	37.6
Aug	1,280	0	31	41.3
Sept	1,086	0	30	36.2
Oct	1,427	0	31	46.0
Nov	1,379	0	30	46.0
Dec	1,253	0	31	40.4
Total	13,899			

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name:	Claudia Cochrane	DATE:	Feb 15, 2014
Signature:		Position Held:	Secretary



Ministry of Natural Resources
Ministère des Richesses naturelles



Oil, Gas and Salt Resources Act
Annual Report of Monthly Injection
For the year 2013

Form 6 To: the Minister of Natural Resources

Operator: TAQA North Ltd.	Tel. # 878-1006	Fax # 472-7897
Address: P. O. Box 9009, 1795 Ernest Ave London, Ontario, N6E 2V5		

Well Name: Various	Source Pool: Rodney Unit
Township: Aldborough	Source Formation: Glacial drift, Columbus
Tract Lot Concession	Fluid Type: Fresh Water, Produced water
Well Licence #	Injection Formation: Columbus
Well Status - Mode*: Inj - ACT	Injection Pool: Rodney Unit
Injection Permit #: 19-1	

* As of Dec 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:
Water is filtered

Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
Jan	10,615	500 to 3200	31	342.4
Feb	13,370	500 to 3200	28	477.5
Mar	16,945	800 to 3100	31	546.6
April	14,003	500 to 3100	30	466.8
May	13,003	500 to 3000	31	419.5
June	14,102	500 to 3000	30	470.1
July	20,741	900 to 3100	31	669.1
Aug	21,016	300 to 3100	31	677.9
Sept	15,457	600 to 3000	30	515.2
Oct	17,347	500 to 3000	31	559.6
Nov	19,519	450 to 3050	30	650.6
Dec	17,205	500 to 3100	31	555.0
Total	193,323			

The undersigned certifies that the above information is complete and accurate and he/she has authority to bind the operator.

Name: Jim McIntosh	DATE: Feb 15, 2014
Signature:	Position Held: Engineering Consultant

