

#### Annual Report of Monthly Injection

#### For the Year 2017

Form 6	To the Minister of Natural Resources	v.2009-05-31
Operator: LONNIE BARNES	Tel. # 519-834-2339 Fax	×#
Address: BOX 242, OIL SPRINGS, ON I	NON 1P0	

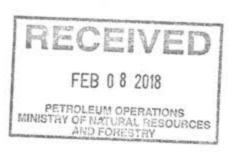
This form only applies to fluid injection for secondary recovery.

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	
Injection Permit No.: 2009-1	LOT 18, CON 1 & 2, ENNISKILLEN TOWNSHIP	

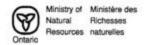
<sup>\*</sup> As of Dec. 31 - active, suspended, abandoned, potential

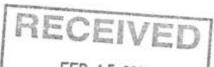
Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan	246.45	5756.92 (400 PSI)	31
Feb	222.60		28
Mar	246.45		31
April	238.50		30
May	246.45		31
June	238.50		30
July	246.45		31
Aug	246.45		31
Sep	238.50		30
Oct	246.45		31
Nov	238.50		30
Dec	246.45		31
Total	2901.75		365



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

DONNA BARNES	Soma Darnes.	
Name (print)	Signature	
BARNES OIL CO	BOOKEEPER	
Company	Title	
05/02/2018	A CONTRACTOR OF THE PARTY OF TH	
Date (day/month/year)		





FEB 15 2018

# Annual Report of Monthly Injection PETROLEUM OPERATIONS for the year 2017

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 #:		

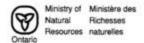
<sup>\*</sup> As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m³/day)
Jan				
Feb				
Mar	986		24	31.80
April	1,514		30	50.47
May	164		5	32.80
June				
July				
Aug				
Sep	1,019		30	33.97
Oct	893		23	38.82
Nov	1,036		30	34.53
Dec	1,163		31	37.52
Total	6,775		173	39.16

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

Name: Lou Vujcic	Date: February 02, 2018
Signature: Toplica Aufaic	Bookkeeper



RECEIVED

FEB 1 5 2018

Oil, Gas and Salt Resources Act

PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES

## Annual Report of Monthly **Injection** for the year 2017

Form 6	To: the Minister of Natura	l Resources
A CHILL C	10. die millistel of truttild	TITOSOMOC

Operator: Cameron Petroleum Inc	Tel. # (519) 657-9304	Fax #
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 #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 #:			

<sup>\*</sup> As of Dec. 31 - Active, suspended, abandoned, testing, potential

Description of fluid treatment prior to injection:	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	Injection Rate (m³/day)
Jan				
Feb				
Mar	680		24	28.33
April	654		31	21.10
May	48		5	9.60
June				
July				
Aug				
Sep	1,392		30	46.40
Oct	732		23	31.83
Nov	776		30	25.87
Dec	728		31	23.48
Total	5,010		174	28.79

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

Name: Lou Vujcic	Date: February 02, 2018		
Signature: Aufrica Aufrica	Bookkeeper		



#### Annual Report of Monthly Injection

MAY 1 5 2018

PETROLEUM OPERATIONS MINISTRY OF NATI. 144, RESOURCES AND POCESTRY

RECEIVED

For the Year 2017

orm 6	To the Minister of Natural Reso	ources		v.2009-0
Operator Cameron Petroleum Inc.		Tel.#	519-657-9304	Fax#
Address P.O. Box 20109, 431 Boler R	d, London, ON 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 #6	Source Pool: Grand Bend	
Township: McGillivray	Source Formation: Guelph	
Lot: 41 Concession NB	Injection Fluid Type: Salt water	
Well Licence No. 1063	Injection Formation: Guelph	
Well Status - Mode* Active	Injection Pool	
Injection Permit No.		

<sup>\*</sup> As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan			
Feb			
Mar	680		24
April	654		31
May	48		5
June			
July			
Aug			
Sep	1,392		30
Oct	732		23
Nov	776		30
Dec	728		31
Total	5,010		174

The undersigned certifies that the information	ion provided herein is complete and accurate and he/she has authorit	ty to bind the operator.
LOU VUJCIC	Lou Trycie	
Name (print)	Signature	_
Cameron Petroleum Inc.	Bookkeeper	
Company	Title	

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Oil, Gas and Salt Resources Act

#### **Annual Report of Monthly Injection**



MAY 15 2018

PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES AND FURESTRY

Operate	Camaran Patralaum Inc			Tol # 540.05	7.0204 5 "	
Operato	perator Cameron Petroleum Inc.			Tel. # 519-65	7-9304 Fax #	
Address	P.O. Box 20109, 431 Boler Ro	d, London, ON N6K 40	G6			
	rm only applies to fluid inj on wells must be reported and				fficient attach addition	onal for
Well Na	me: Imperial Union Grand B	Bend #2	Source F	Pool: Grand B	end	
	ip: McGillivray		Source F	ormation: Gu	elph	
Lot : 41	Concession NB		Injection	Fluid Type: S	alt water	
	ence 11413		Injection	Formation: G	uelph	
	tus - Mode* Active		Injection	Pool		
	Permit No.					
* As of D	ec. 31 - active, suspended, ab	andoned, potential		0		
Descript	ion of fluid treatment prior to	niniection				-
Descript	ion of halo treatment phor to	o injection				
					21.	
Month	Volume Injected (m³)	Average Daily Injection Pressu (kPag at wellhe	ure Ir	ays on njection		
Jan	1	(Kr ag at welline	auj		1	
Feb					1	
Mar	986			24	1	
April	1,514			30	1	
May	164			5	1	
June					1	
July					1	
Aug					1	
Sep	1,019			30	1	
Oct	893			23	1	
Nov	1,036			30	1	
Dec	1,163			31	1	
Total	6,775			173	1	
· otal	3,770	1		173	J.	
The under	signed certifies that the information	n provided herein is com	plete and a	ccurate and he/sl	ne has authority to bind	the on
LOU VUJ				Freseric		
Name (print		Signatur		-		
Cameron F	Petroleum Inc.	Bookkee	eper	1		
9420000000000	TAXABILLI VI	2000000	200			
Company		Title				



#### Oil, Gas and Salt Resources Act

#### Annual Report of Monthly Injection

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Brog	50m	H	Bone	큪.	11.11	South	B B
10 10	Been	64	Deper	я.	w	Sharent	Drust?

MAY 1 5 2018

PETROLEUM OPERATIONS MINISTRY OF NAME, TALL RESOURCES

orm 6		To the Minister	of Natural F	Resources		v.2009-05
Operato	r Cameron Petroleum Inc.			Tel. #	519-657-9304	Fax#
Address	P.O. Box 20109, 431 Boler Rd	, London, ON N6	< 4G6			
This for All injecti	rm only applies to fluid injuiction wells must be reported and	ection for secon all injection must	ndary red be reporte	covery. ed. If space is in	sufficient attach addition	onal forms.
Nell Na	me Robert McMaster & Son	s – Gobles 7	Sour	ce Pool Goble	es.	
Township Blenheim			Source Formation			
ot 19 Concession 1			Inject	tion Fluid Type		
Vell Lic	ence No. 1025		_	tion Formation		
Vell Sta	atus - Mode* Suspended		-	tion Pool		
njection	Permit No.					
	ec. 31 - active, suspended, aba	andoned, potential				
Joseph	tion of fluid treatment prior to	injection				
Jescripi	tion of fluid treatment prior to	injection				
Month	Volume Injected (m³)	Average Dail Injection Pre	ssure	Days on Injection		
W - 27.250 H	Volume Injected (m³)		ssure			
lan	Volume Injected (m³)	Injection Pre	ssure			
lan eb	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar	Volume Injected (m³)	Injection Pre	ssure			
an eb Mar April	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May lune	Volume Injected (m³)	Injection Pre	ssure			
an Mar April May June July	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May lune luly Aug	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May lune luly Aug Sep Oct	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May lune luly Aug Sep Oct	Volume Injected (m³)	Injection Pre	ssure			
lan Feb Mar April May lune luly Aug Sep Oct Nov		Injection Pre (kPag at well	ssure lhead)	Injection		
lan Feb Mar April May lune luly Aug Sep Oct	Volume Injected (m³)	Injection Pre	ssure lhead)			
an Teb Mar April May une luly Aug Sep Oct Nov Dec		Injection Pre (kPag at well	ssure lhead)	Nil	e/she has authority to bind	d the operato

Title

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#### **Annual Report of Monthly Injection**



MAY 15 2018

PETROLEUM OPERATIONS MINISTRY OF NATURAL PESOURCES

Form 6		To the Minister	of Natural I	Resources		v.2009-05	
Operato	r Cameron Petroleum Inc.			Tel.#	519 657 9304	Fax#	
Address	P.O. Box 20109, 431 Boler R	d, London, ON N6	K 4G6				
This for All injecti	rm only applies to fluid inj ion wells must be reported and	ection for seco	ndary re be reporte	covery. ed. If space i	s insufficient attach ad	dditional forms.	
Well Na	me Robert McMaster & Son	s -Gobles 4	Sour	ce Pool Gob	oles		
Townsh	ip Blenheim		Sour	ce Formatio	n		
Lot				Injection Fluid Type			
Vell Licence No. 149			Injection Formation				
Nell Sta	atus - Mode* Suspended		Injection Pool				
njection	Permit No.						
As of D	ec. 31 - active, suspended, ab	andoned, potentia	ıl				
Descrint	tion of fluid treatment prior to	niniection					
Descript	don of haid treatment prior to	o injection					
Month	Volume Injected (m³)	Average Da Injection Pre (kPag at we	essure	Days on Injection			
Jan						29	
Feb							
Mar	<u> </u>			1			
April	<del> </del>						
May							
June				1			
July							
Aug							
Sep							
Oct							
Vov		1					
Dec							
Total	Nil	Nil		Nil	-		
otal	140	140		1.40			
The under	signed certifies that the information	n provided herein is	~^			bind the operator	
ou Vujcio			Fou	Fregan	<u> </u>		
Name (print Cameron I	t) Petroleum Inc		nature kkeeper	1			
Company		Tit					

15/05/2018

Date (day/month/year)



Oil, Gas and Salt Resources Act

### Annual Report of Monthly Injection

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	MAY 1 5 2018

		For the Year		2017	I mare of the second	- Service
orm 6		To the Minister of	Natural F	Resources		v.2009-05
Operator	Cameron Petroleum Inc.			Tel.#	519-657-9304	Fax#
Address	P.O. Box 20109, 431 Boler Rd, L	ondon, ON N6K 4	4G6			
This for All injection	m only applies to fluid injection wells must be reported and all	tion for second injection must be	lary red	covery. d. If space is in	nsufficient attach additio	nal forms.
Well Nar	me Robert McMaster & Sons -	- Gobles 2	Source	ce Pool Goble	es	
Townshi	p Blenheim		Source Formation			
Lot 19 Concession 1			Injection Fluid Type			
Well Lice	ence No. 141		Inject	ion Formation		
Well Sta	tus - Mode* Suspended		Inject	ion Pool		
Injection	Permit No.					
As of De	ec. 31 - active, suspended, abanc	doned, potential				
Descript	ion of fluid treatment prior to in	jection				
Month	Volume Injected (m³)	Average Daily Injection Press (kPag at wellho		Days on Injection		
Jan		(Ki ag at Wellin	caaj			
Feb					-	
Mar					-	
April						
May					_	
June					-	
July					-	
Aug					-	
Sep						
Oct				-		
27.707						
Nov					$\dashv$	
Oct Nov Dec	Nii	Nil		Nii		
Nov	Nil	Nil		Nil		
Nov Dec Total	signed certifies that the information pr		_ //	nd accurate and h	ne/she has authority to bind	the operate
Nov Dec Total	signed certifies that the information pr		Lon		ne/she has authority to bind	the operate



Oil, Gas and Salt Resources Act

#### Annual Report of Monthly Injection

MAY 1 5 2018

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PETROLEUM OPERATIONS MINISTRY OPERATOR

		To the Minister of	f Natural F	Resources		v.2009-0
Operator	r Cameron Petroleum Inc.			Tel.#	519-657-9304	Fax#
Address	P.O. Box 20109, 431 Boler Rd	, London, ON N6K	4G6			
_						
This for All injection	m only applies to fluid injection wells must be reported and	ection for secon all injection must b	dary red e reporte	covery. ed. If space is ins	sufficient attach addition	onal forms.
Well Na	me Robert McMaster & Son:	s – Gobles 20	Source	ce Pool Goble	s	
Townshi	p Blenheim		Source Formation			
Lot 16 Concession 1			Injection Fluid Type			
Well Lice	ence No. 1287		Inject	tion Formation		
Well Sta	tus - Mode* Suspended		Inject	tion Pool		
Injection	Permit No.					
* As of D	ec. 31 - active, suspended, aba	andoned, potential				
		1-1				
Descript	ion of fluid treatment prior to	injection				
Month	Volume Injected (m³)	Average Dail	у	Days on	7	
		Injection Pre		Injection		
lan		(kPag at well	head)	-	-	
		(kPag at well	head)			
Feb		(kPag at well	head)			
Jan Feb Mar		(kPag at well	head)			
Feb Mar April		(kPag at well	head)			
Feb Mar April May		(kPag at well	head)			
Feb Mar April May June		(kPag at well	head)			
Feb Mar April May June July		(kPag at well	head)			
Feb Mar April May June July Aug		(kPag at well	head)			
Feb Mar April May June July Aug		(kPag at well	head)			
Feb		(kPag at well	head)			
Feb Mar April May June July Aug Sep		(kPag at well	head)			
Feb Mar April May June July Aug Sep Oct		(kPag at well	head)			
Feb Mar April May June July Aug Sep Oct Nov	Nil	Nil	head)	Nil		
Feb Mar April May June July Aug Sep Oct Nov Dec Total	Nil signed certifies that the information	Nil			e/she has authority to bin	d the operal
Feb Mar April May June July Aug Sep Oct Nov Dec Total	signed certifies that the information	Nil			a/she has authority to bine	d the opera

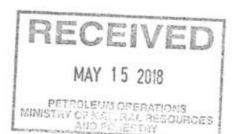
Title



Date (day/month/year)

Oil, Gas and Salt Resources Act

### Annual Subsurface Oil Field Fluid Disposal Report



orm 9		To the Min	ister of Natura	Resources		v.2009-0
Operator	Cameron Petroleur	n Inc.		Tel.#	519 657 9304	Fax#
Address	P.O. Box 20109, 43	1 Boler rd, London, ON	N5K 4G6			
Well Nar	me Rayrock Bow \	/alley Disposal #1	So	urce Pool		
Townshi	p Blenheim		So	urce Formation	1	
Lot 2		n 1	Dis	posal Formation	on	
Well Lice	ence No. 2480		10			
Well Sta	tus - Mode* Active	е				
Fluid acc	cepted from other	spended, abandoned operators?   Yes quantity received per received.			ach list of operators	from whom
Month			Days on Disposal		Comments – i.e. workovers, treatments,	
Jan		100000000000000000000000000000000000000				
Feb						
Mar						
April						
May						
June						
July						
Aug						
Sep						
Oct						
Nov						
Dec						
Total						
Cum. Total**	Nil	Nil	Nil			
* *Cumu	signed certifies that the	osed since the well was			the/she has authority to	bind the operat
Cameron F Company	Petroleum Inc.		Bookkeeper Title	0		
15/05/18						



## Annual Report of Monthly Injection

Well Na	me MORNING SOM WEST	#22 3-19-4	Source	Pool Mil	50- 15
Townshi	P ENINISKILL EN	120 3-17-16		Formation	SPRINGS Dunder
Lot 19					eir Fierd BRINE
Well Lice	ence No. To ill v 6	-10-11-17-1	Injectio	n Formation	DUM DEE
Well Sta	tus - Mode * Sus Port	48	Injectio	n Pool	
Injection	Permit No.				
As of De	ec. 31 - active, suspended, aba	andoned, potential			
Month	Volume Injected (m³)	Average Daily	T	Days on	7
Month	Volume Injected (m³)	Average Daily Injection Pressi (kPag at wellhe	ure	Days on	System words
	Volume Injected (m³)	Injection Pressu	ure		Syspen words Per AIR.
Jan	Volume Injected (m³)	Injection Pressu	ure		System words Per AIR.
Jan Feb Mar	Volume Injected (m³)	Injection Pressu	ure		Syspen words Per AIR.
Jan Feb Mar April	Volume Injected (m³)	Injection Pressu	ure		
Jan Feb Mar April May	Volume Injected (m³)	Injection Pressu	ure		
Jan Feb Mar April May June	Volume Injected (m³)	Injection Pressu	ure		RECEIVE
Jan Feb Mar April May June	Volume Injected (m³)	Injection Pressu	ure		
Jan Feb Mar April May June July	Volume Injected (m³)	Injection Pressu	ure		RECEIVE MAY 3 1 2018
Jan Feb Mar April May June July Aug Sep	Volume Injected (m³)	Injection Pressu	ure		RECEIVE MAY 3 1 2018
Jan Feb Mar April May June July Aug Sep Oct	Volume Injected (m³)	Injection Pressu	ure		RECEIVE MAY 3 1 2018
Month  Jan Feb Mar April May June July Aug Sep Oct Nov	Volume Injected (m³)	Injection Pressu	ure		RECEIVE MAY 3 1 2018



## Annual Report of Monthly Injection

Woll No	me MORN INSSTAR EAST	479 E10.11	Cour	ce Pool on	
Townsh		+129 J-19-11		ce Formation	L SPRINGS DUNDER
Lot	Concession			ion Fluid Type	OIL FIRD BRINE
CD 11 5-04	ence No. TO 1111 Z		-	ion Formation	DUNDER
Well Sta	tus - Mode * Suspen 's	ED	-	ion Pool	n PEE
Injection	Permit No.	- A.	-		
As of D	ec. 31 - active, suspended, aba	andoned, potential	-		
Descript	ion of fluid treatment prior to	injection			
			_		
Month	Volume Injected (m3)	Average Daily		Days on	7
					(i)
	P 25 15	Injection Press		Injection	ROPAINS NECESSAM
	8 9 9	Injection Press (kPag at wellhe		Injection	Kopans Necessite
0.000,000				Injection	Repairs Necessiii
eb				Injection	Ropains Necessiii
eb Mar				Injection	
Feb Mar April				Injection	
Feb Mar April May				Injection	RECEIVE
Feb Mar April May June				Injection	RECEIVE
Feb Mar April May June				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug Sep				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug Sep Oct				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug Sep Oct				Injection	RECEIVE MAY 3 1 2018
Jan Feb Mar April May June July Aug Sep Oct Nov				Injection	RECEIVE MAY 3 1 2018



## Annual Report of Monthly Injection

Form 6		To the Minister of Nat	ural Resources	v.2009-05-31
Operate	or CHAMITS FAIRBANK	OK PROPERTIES L	Tel. #549-	08'2-0230Fax#
Addres	\$ 394 STATION ST	TROET PETZ	OLIA, OWT	NUH IRU
This fo	orm only applies to fluid in	ection for secondar	y recovery.	sufficient attach additional forms.
	ame Mordinssiane E			L SPRINGS
Townsh			Source Formation	DUNDEE
Lot	Concession		njection Fluid Type	0 10 1 100 17 17 10 100
	cence No. To IIII o		njection Formation	DUNDEE
	atus - Mode* Suspende	D II	njection Pool	- te
-	n Permit No.			
As of D	Dec. 31 - active, suspended, abo	andoned, potential		
Descrip	tion of fluid treatment prior to	niniection		
Descrip	tion of hald treatment prior to	, injection		
			3-79 - 73 - 73 - 73	
				,
Month	Volume Injected (m3)	Average Daily	Days on	REDAIRS TO SYSTEM
	300 8 8	Injection Pressure	e Injection	KOPAIRS 10
		(kPag at wellhead	i)	NECERSARY
Jan				
Feb		1		
Mar				
April				The Box to Rose S A M Rose Box
May				RECEIVED
June				
July				MAY 3 1 2018
Aug				DETROILEUM OPERATIONS
Sep				PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCE AND FORESTRY
Oct		9		AND FORESTRY
Nov				
Dec			and the same	
Total	0	-		
C HAR	Signed certifies that the information  LLS FAIRD AWIL  123 AWK 014	provided herein is completed Signature	e and accurate and her	/she has authority to bind the operator.
		Tiue		
2	3/05/18			5. 3



## Annual Report of Monthly Injection

welliva	THE MURNINGSPAR EAST	#20 5-19-4		ce Pool 0/6	SP NWGS
Townshi	P EWNISKILLEN	10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Sour	ce Formation `	DUNDEE
Lot 19	Concession		Injec	tion Fluid Type	OIL FICED BRINE
Well Lice	ence No. To 11109		Inject	ion Formation	DUNDER
Well Sta	tus - Mode * Sugp owy	67	Inject	tion Pool	и
NAME OF TAXABLE PARTY.	Permit No.		200		
* As of De	ec. 31 - active, suspended, aba	andoned, potential			
Descripti	on of fluid treatment prior to	injection			
- oddipt	s or note a countriest prior to				
Month	Volume Injected (m <sup>3</sup> )	Average Daily		Days on	System Newd)
		Injection Press		Injection	- SE D-OAIACD
Jan		Injection Press (kPag at wellhe		Injection	TO BE REPAINED
				Injection	TO BE REPAIRED
Feb				Injection	TO BE REPAIRED
Feb Mar				Injection	TO BE REPAINED
Feb Mar April				Injection	TO BE REPAINED
Feb Mar April May				Injection	RECEIVE
Feb Mar April May June				Injection	TO BE REPAINED
Jan Feb Mar April May June July Aug				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug Sep				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July Aug Sep Oct				Injection	RECEIVE MAY 3 1 2018
Feb Mar April May June July				Injection	RECEIVE MAY 3 1 2018



## Annual Report of Monthly Injection

Form 6		To the Minister of I	Natural F	Resources	v.2009-05-31
Operato	CHARLES FAIRTHUIT	LOIL PRYMIT	15 LT	D Tel. #519-	382-023@ax#
		<u> </u>			T. NON IRO
This for All injection	rm only applies to fluid inj on wells must be reported and	ection for second all injection must be	lary red	covery. d. If space is ins	sufficient attach additional forms.
Well Na	ME HORNING SIMM WES	T #16 3-19-11	_		SPRINGS
	P EN NISKILLOW			e Formation	DUNDER
Lot 19			and the second second	ion Fluid Type	OIL FIELD BRIKE
Well Lice	ence No. To ill 08			ion Formation	Dunber
Well Sta	tus - Mode * Sus Pow 17	(1)	Inject	ion Pool	64
-	Permit No.				
'.As of De	ec. 31 - active, suspended, aba	andoned, potential			
Descript	ion of fluid treatment prior to	niniection			1
Jescript	on or haid treatment prior to	) Injection			
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Month	Volume Injected (m3)	Average Daily		Days on	7
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oct					MINISTRY OF NATURAL RESOURCE AND FORESTRY
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he unders	igned certifies that the information	provided herein is comp	plete and	accurate and he	she has authority to bind the operator.
CHA	LUS FAIRBANK	(0)	1	304	$\overline{}$
		Signatur	re		<del></del>
TAI	RBANK OIL	A	RES	DENT	
ompany		Title	The state of the s		
22/11	5/19				



#### Annual Report of Monthly Injection

	menoninasnya was rat				ufficient attach additional forms.
Townshi		, CANINCICED II		e Formation	S PRINGS DUNDEE
Lot 19	Concession J		Injecti	ion Fluid Type	OIL FICUD DRING
Well Lice	ence No. T006205			on Formation	Dunder
Well Sta	tus - Mode saspor De	ò	Injecti	ion Pool	'n
Injection	Permit No.		-		
* As of De	ec. 31 - active, suspended, aba	andoned, potential			
Descripti	on of fluid treatment prior to	o injection	_		
50001150	on or now a countrie prior a	, injudicin			
	The second secon				
		- Paris			,
Month	Volume Injected (m <sup>3</sup> )	Average Daily		Days on	7
Month	Volume Injected (m <sup>3</sup> )	Injection Press		Days on Injection	
	Volume Injected (m <sup>3</sup> )				INTERNOW SYSAM
Jan	Volume Injected (m <sup>3</sup> )	Injection Press			
Jan Feb	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM
Jan Feb Mar	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM
Jan Feb Mar April	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM NOONS REPAIR.
Jan Feb Mar April May	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM NOONS REPAIR.
Jan Feb Mar April May June	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM
Jan Feb Mar April May June	Volume Injected (m <sup>3</sup> )	Injection Press			INTERNOW SYSAM NOONS REPAIR.
Jan Feb Mar April May June July Aug	Volume Injected (m <sup>3</sup> )	Injection Press			RECEIVE  MAY 3 1 2018
Jan Feb Mar April May June July Aug Sep	Volume Injected (m³)	Injection Press			NEEDS REPAIR.  RECEIVE  MAY 3 1 2018  PETROLEUM OPERATIONS MINISTRY OF MATURAL RESOUR
Month Jan Feb Mar April May June July Aug Sep Oct	Volume Injected (m <sup>3</sup> )	Injection Press			NOTES REPAIR.
Jan Feb Mar April May June July Aug Sep	Volume Injected (m <sup>3</sup> )	Injection Press			NEEDS REPAIR.  RECEIVE  MAY 3 1 2018  PETROLEUM OPERATIONS MINISTRY OF MATURAL RESOUR



2/14/2018

Date (day/month/year)

#### Oil, Gas and Salt Resources Act

#### Annual Report of Monthly Injection

For the Year 2017

Form 6	To the Minister of Natural R	To the Minister of Natural Resources				v.2009-05-3
Operator	Dundee Oil and	Gas Limited	Tel#	519-433-7710	Fax#:	519-433-7588
Address		Unit B, 1030 Adelaide	St S, London, On N6	E 1R6	10.	
This form only applies to fluid	injection for secondar recovery, and and all injection must be reported. If space	is insufficient attach additional forme	s			
Well Name	Paragon e al No.20		Source Pool		Rochester	
Township	Rochester		Source Formation		Trenton	
Lot/ Concession	Lot 15, Concession II	1	njection Fluid Type		GAS	
Well License No.	T008313		njection Formation		Trenton	
Well Status- Mode*	Gas Injection				Rochester	
Injection Permit No.						
*As of Dec. 31- active, suspend	ded, abandoned, potential					
Month	Volume Injected (m3)	Average Daily Injection Pressure (kPag at wellhe		on Injection	]	
JAN	43,370	2758		31	1	
FEB	30,010	552		28		
MAR	48,990	3172		31		
APRIL	51,620	3172		30	1	
MAY	50,120	3723		31		
JUNE	53,490	3241		30		
JULY	57,270	3378		31		
AUG	54,460	3378		31		
SEP	57,770	3309		30		
OCT	50,352	3309		31		
NOV	52,610	3309		30		
DEC	31,460	3309		31		
TOTAL	581,522			365	J	
Name (print)	Bruce Sherley	d accurate and hi/she has authority to	bind the operator	luly		
Company		Title		- N-4		

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PETROLEUM OPERATIONS
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AND FORESTRY





#### **Annual Report of Monthly Injection**

PETPOLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES AND PORESTRY

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FEB 1 5 2018

For the Year 2017

Form 6	To the Minister of Natural Resources	v.2009-05-31
Operator: Liberty Oil & Gas Ltd.	Tel. # 519-695-3811	Fax # 519-695-3852
Address: 185 McEwan Street, Bothwell, O	N NOP 1C0	

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 - Trenton & Black F			
Lot: 6 Concession: IV E	Injection Fluid Type: Formation Water (Brine)			
Well Licence No. T007802	Injection Formation: Ordovician - Black River			
Well Status - Mode*: INJ-Active	Injection Pool: Dover 7-5-V-E (Dover East)			
Injection Permit No.: 2007-1				

<sup>\*</sup> As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection	
None	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection	
Jan	130.3	0	7	
Feb	128.4	0	8	
Mar	107.5	0	8	
April	128.3	0	8	
May	135.6	0	8	
June	97.5	0	4	
July	148.5	6	6	
Aug	97	0		
Sep	82	0	4	
Oct	112.9	0	5	
Nov	83.5	0	5	
Dec	92.5	0	5	
Total	1343.8	0	74	

The undersigned certifies that the information	provided herein is con	mplete and adcurate and	he/she has authority	to bind the operator
--	------------------------	-------------------------	----------------------	----------------------

Jane Lowrie	( Nourse)
Name (print)	Signature
Liberty Oil & Gas Ltd.	President
Company	Title
15/02/2018	

Date (day/month/year)



Oil, Gas and Salt Resources Act

# Annual Report of Monthly Injection

For the Year 2017



FEB 1 5 2018

PETROLEUM OPERATIONS
MINISTRY OF NATURAL RESOURCES
AND FORESTRY

Form 6 To the N	inister of Natural Resources v.2009-05-31
Operator: On-Energy Corp.	Tel. # 519-695-3811 Fax # 519-695-3852
Address: 185 McEwan Street, Bothwell, ON NOP	100

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: Rodney Unit 3	Source Pool: Basal		
Township: Aldborough	Source Formation: Glacial Gravel/Sand		
Lot: Concession:	Injection Fluid Type: Fresh Water		
Well Licence:	Injection Formation: Dundee		
Well Status - Mode*: Active	Injection Pool: Rodney R & R Unit 3		
Injection Permit No.:			

<sup>\*</sup> As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection	
None	
2014 101 2	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan	0	0	0
Feb	0	0	0
Mar	322.79	160	23
April	429.12	220	30
May	443.42	220	31
June	429.12	220	30
July	443.42	220	31
Aug	457.72	227	31
Sep	443.42	227	30
Oct	443.42	220	31
Nov	271.77	139	19
Dec	0	0 0	0
Total	3684.20		256
		11/	

The undersigned certifies that the information	ation provided herein is complete and accurate and he/she has authority to bind the o	perator.
Jane Lowrie	( Novine	
Name (print)	Signature	
On-Energy Corn	President	

Title

15/02/2018

Company

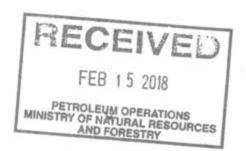
Date (day/month/year)

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Oil, Gas and Salt Resources Act

# Annual Report of Monthly Injection



For the Year 2017

Form 6 To the Minister of Natural Resources

v.2009-05-31

Operator: On-Energy Corp.

Tel. # 519-695-3811

Fax # 519-695-3852

Address: 185 McEwan Street, Bothwell, ON NOP 1C0

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: Rodney South Unit	Source Pool: Unit 3, Rodney South Unit		
Township: Aldborough	Source Formation: Dundee		
Lot: D Concession: VII	Injection Fluid Type: Recovered Formation & Injection Waters		
Well Licence:	Injection Formation: Dundee		
Well Status - Mode*: Active	Injection Pool: Rodney South Unit		
Injection Permit No.: 2008-1			

<sup>\*</sup> As of Dec. 31 - active, suspended, abandoned, potential

Description of fluid treatment prior to injection	
None	

Month	Volume Injected (m³)	Average Daily Injection Pressure (kPag at wellhead)	Days on Injection
Jan	0	0	0
Feb	0	0	0
Mar	0	0	0
April	0	0	0
May	0	0	0
June	0	0	0
July 0		0	0
Aug	0	0	0
Sep	0	0	0
Oct	0	0	0
Nov	0	0	0
Dec	0	0/	0
Total	0	1 0	0

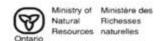
The undersigned certifies that the information	provided herein is complete	and accurate and	he/she has authority	to bind the operator
--	-----------------------------	------------------	----------------------	----------------------

Jane Lowrie	/ hourse	$\geq$
Name (print)	Signature	
On-Energy Corp.	President	
Company	Title	

15/02/2018

Date (day/month/year)

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## Oil, Gas and Salt Resources Act Annual Report of Monthly Injection For the year 2017

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PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES AND FORESTRY

Form 6 To: the Minister of Natural Resources

Operator: Pintail Production Inc. Tel. # 472-1542

Fax # 472-9434

Address:

2 Marchand Drive, Penetanguishene, ON

Well Name: Township:

Bluewater True Fitzgerald

Plympton

Tract: 3 Lot: 20 Well Licence # T005393 Concession: VI

Source Pool: Source Formation: Plympton 5-19-VI Guelph

Fluid Type:

Injection Formation:

Formation brine Guelph

Injection Pool:

Well Status - Mode\*: Injection Permit #:

Inj - ACT

2001-1

Plympton 5-19-VI

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	1,137	0	31	36.7
Feb	935	0	25	37.4
Mar	1,092	0	31	35.2
April	1,076	0	29	37.1
May		0	8	<u> </u>
June	218	0	9	24.3
July		0	-	
Aug		0	-	
Sept	-	0		
Oct		0		
Nov	-	0	-	
Dec	-	0	-	
Total	4,459			

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

Name:	Claudia Cochrane	DATE: Feb 15, 2018	
Signature:	mile Collitare	Position Held: Sheretamy tunker	

<sup>\*</sup> As of Dec 31 - Active, suspended, abandoned, testing, potential

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Oil, Gas and Salt Resources Act

# **Annual Report of Monthly Injection**

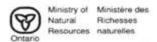
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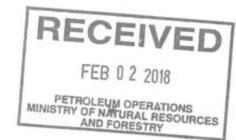
MAR 1 2 2018

Address This for		To the Minister of N	Natural Re	sources		v.2009-0		
Address This for			rm 6 To the Minister of Natural Resources					
This for		perator Reef Resources Ltd.			1-9447	Fax# NA		
	m only applies to fluid injury on wells must be reported and				ufficient atta	ch additional forms		
Well Nar	me Daybreak Ausable No. 3	3	Source	e Pool Ausab	le			
Townshi	p Steven		Source	e Formation G	uelph			
Lot 11	Concession XXII		Injection	on Fluid Type	natural gas	à ,,, , , , , , , , , , , , , , , , , ,		
Well Lice	ence No. T009577		Injection	on Formation	Guelph			
Well Sta	tus - Mode* SUS		Injection	on Pool Ausat	ole			
Injection	Permit No. 2003-1							
* As of De	ec. 31 - active, suspended, aba	andoned, potential						
Descript	an of finial transfer and a direct	telestics						
	ion of fluid treatment prior to			4				
Natural g	gas will be treated through a	refrigeration plant	and the	dry gas re-inje	ected			
Month	Volume Injected (m³)	Average Daily		Days on	7			
MOHIII	volume injected (in-)	Average Daily Injection Pressure (kPag at wellhead)		Injection				
Jan	0	0	,	0	7			
Feb	0	0		0	1 .			
Mar	0	0		0	1			
April	0	0		0	7			
May	0	0		0	1			
June	0	0		0	_			
July	0	0		0	1			
Aug	0	0		0	1			
Sep	0	0		0	1			
Oct	0	0		0	1			
Nov	0	0		0	1			
Dec	0	0		0	1			
Total	0	0		0	-			
200 De 100 De 1	100	2000			-			
				1				
The unders	signed certifies that the information	provided herein is com	nplete and	accurate and he	she has author	rity to bind the operat		
Arnie Hans	en		11		7			
ealinger in the same		-	1					
Name (print)		Signatu	ine C					
Reef Resor Company	urces Ltd. President	Title						

09/03/2018 Date (day/month/year)







## Oil, Gas and Salt Resources Act Annual Report of Monthly Injection For the year 2017

Form 6 To: the Minister of Natural Resources

Operator: Roth & Roth Limited Tel. # 472-1542 Fax # 472-9434

Address: 2 Marchand Drive, Penetanguishene, ON, L9M 2J3

Well Name: Roth & Roth 4 Johnson 1 Enn 31-XIV | Source Pool: Brine ponds, Pembina Infra, Production

Township: Enniskillen Source Formation: Salina B Salt, Guelph

Tract: 3 Lot: 31 Concession: XIV Fluid Type: Cavern washing brine, production

Well Status - Mode\*: Inj - ACT Injection Pool: Wanstead Injection Permit #: 2001-2

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

As of Dec 51 - Active, suspended, abandoned, testing, potential

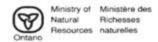
Description of fluid treatment prior to injection:
Addition of oxygen scavanger, scale inhibitor. Water is filtered

Month	Volume Injected (m3)	Average Daily Injection Pressure kPag	Days on Injection	Injection Rate (m3/day)
Jan	499.9	0	29	17.2
Feb	286.1	0	24	11.9
Mar	279.1	0	24	11.6
April	-	0	0	
May	-	0	0	
June		0	0	
July	58.0	0	3	19.3
Aug	-	0	0	
Sept		0	0	
Oct	-	0	0	
Nov	-	0	0	
Dec	-	0	0	
Total	1,123			

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

Name:	Claudia Cochrane	DATE: Feb 15, 2018	2
Signature:	Candia Colletine	Position Held: Secretary	12 coster





### Oil, Gas and Salt Resources Act Annual Report of Monthly Injection For the year 2017



PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES AND FORESTRY

Form 6

To: the Minister of Natural Resources

Tel. # 878-1006 Operator: TAQA North Ltd. Fax # 472-7897 Address: 21609 Kintyre Line Rodney, ON, N0L 2C0

Well Name:

Various

Source Pool:

Rodney Unit

Township:

Aldborough

Source Formation:

Glacial drift, Columbus

Tract

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

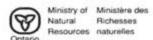
\* As of Dec 31 - Active, suspended, abandoned, testing, potential

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	14,692	500 to 3400	31	473.9
Feb	13,715	500 to 3400	28	489.8
Mar	15,540	500 to 3400	31	501.3
April	13,634	500 to 3400	30	454.5
May	15,509	500 to 3400	31	500.3
June	14,619	500 to 3400	30	487.3
July	13,370	500 to 3400	31	431.3
Aug	13,673	500 to 3400	31	441.1
Sept	13,579	500 to 3400	30	452.6
Oct	12,894	500 to 3400	31	415.9
Nov	9,933	500 to 3400	30	331.1
Dec	11,677	500 to 3400	31	376.7
Total	162,835			

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

Name:	Jim McIntosh	15-Feb-18	
Signature:	ALAX	Position Held:	Engineering Consultant





FEB 0 8 2017

PETROLEUM OPERATIONS MINISTRY OF NATURAL RESOURCES AND FORESTRY

#### Oil, Gas and Salt Resources Act Annual Report of Monthly Injection For the year 2016

Form 6 To: the Minister of Natural Resources

Operator: TAQA North Ltd. Tel. # 878-1006 Fax # 472-7897

Address: 21609 Kintyre Line Rodney, ON, N0L 2C0

Well Name: Various Source Pool: Rodney Unit Source Formation: Glacial drift, Columbus Township: Aldborough Tract Concession Fluid Type: Fresh Water, Produced water Lot Columbus Well Licence # Injection Formation: 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	17,471	500 to 3400	31	563.6
Feb	14,754	500 to 3400	29	508.8
Mar	14,668	500 to 3400	31	473.2
April	14,302	500 to 3400	30	476.7
May	15,855	500 to 3400	31	511.5
June	17,020	500 to 3400	30	567.3
July	17,784	500 to 3400	31	573.7
Aug	17,835	500 to 3400	31	575.3
Sept	17,431	500 to 3400	30	581.0
Oct	18,073	500 to 3400	31	583.0
Nov	15,916	500 to 3400	30	530.5
Dec	16,325	500 to 3400	31	526.6
Total	197,434			

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

Name:	Jim McIntoshy	15-Feb-17	
Signature:		Position Held:	Engineering Consultant

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