

CASING MECHANICAL INTEGRITY TEST

28-14-22E
DOCKET # E 24,883Disposal ☐ Enhanced Recovery: _____Repressuring ☐Flood ☐Tertiary ☐

Date injection started _____

API #15 - 091 - 22,086_____, Sec 28, T 14 S, R 22 E/W1875 1875 Feet from South Section Line1115 1115 Feet from East Section LineLease W. H. MeyersWell # 116ACounty JohnsonOperator: Hite EnergyOperator License # 9511

Name & _____

Address P.O. Box 304Contact Person Mike GilesCuba Mo.

Phone _____

Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;

If Dual Completion - Injection above production _____

Injection below production _____

Conductor _____

Surface _____

Production _____

Liner _____

Tubing _____

Size _____

4"278

Size _____

Set at _____

20956

Set at _____

Cement Top _____

20

Type _____

" Bottom _____

20956

DV/Perf. _____

TD (and plug back) _____

960

ft. depth _____

Packer type _____

Size _____

Set at _____

Zone of injection 886ft. to ft. 895Perf. or open hole perf.

Type Mit: _____

Pressure ☒Radioactive Tracer Survey ☐Temperature Survey ☐F Time: Start 10 Min. 20 Min. 30 Min.

I _____

E Pressures: 600600600

Set up 1

System Pres. during test _____

L 600 lb600600

Set up 2

Annular Pres. during test _____

D _____

600600

Set up 3

Fluid loss during test 0 bbls.

D _____

600600

Set up 3

A _____

600600

Set up 3

T Tested: Casing ☒ or Casing - Tubing Annulus ☐RECEIVED
STATE CORPORATION COMMISSION
DEC 2 1989
CONSERVATION DIVISION
Wichita, Kansas

A _____

600600

Set up 3

The bottom of the tested zone is shut in with float shoeTest Date 9-12-89 Using Consolidated Company's Equipment

The operator hereby certifies that the zone between _____ feet and _____ feet

was the zone tested

Robert Fichter

Signature

Reiller

Title

The results were Satisfactory ☒, Marginal _____, Not Satisfactory _____State Agent Jack KobiTitle P.I.H.Witness: Yes ☒ No _____

REMARKS: _____

☐ Origin. Conservation Div.;☐ KDHE/T;☐ Dist. Office;☐ Computer Update

KCC Form U-7 6/84