

Reporting Period 1984

TO:
STATE CORPORATION COMMISSION
CONSERVATION DIVISION - UIC SECTION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

DOCKET NO. C-5762 [C-55531]
KCC KDHE

SEC 34, T 16 S, R 25 [☐] West
[☒] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Schultz Well# 33
(if battery of wells, attach list with
locations)

Feet from N/E section line 500

Operator License Number 5165

Feet from W/E section line 600

Operator:
Name & Address REESE EXPLORATION, INC.
P. O. BOX 11598
KANSAS CITY, MO 64138

Field Lansburg

County Miami

Disposal [☐] or Enhanced Recovery [☐]

Contact Person Dotty Eichman
Phone 816-356-1990

Person (s) responsible for monitoring well Charles Howard
Was this well/project reported last year? [☒] yes [☐] no
List previous operator if new operator _____

I. INJECTION FLUID:

Type: Source: Quality:
[☐] fresh water [☒] produced water Total dissolved solids _____ ppm/mgm/liter
[☐] brine treated other: _____ Additives _____
[☐] brine untreated (attach water analysis, if available)
[☒] water/brine mixture

TYPE COMPLETION:

[☐] tubing & packer packer setting depth _____ feet.
[☒] packerless (tubing-no packer) Maximum authorized pressure 350 psi.
[☐] tubingless (no tubing) Maximum authorized rate 400 bbl/day.

Month	Total Fluid Injected in Month (bbl)	Days of Injection	Maximum Injection Pressure	Average Injection Pressure	Aver. Pressure Tubing to Casing Annulus	Pressure psig Casing to Surf. Pipe
Jan.	<u>438</u>	<u>31</u>	<u>350</u>	<u>345</u>	<u>0</u>	<u>N/A</u>
Feb.	<u>429</u>	<u>29</u>				
Mar.	<u>433</u>	<u>31</u>				
Apr.	<u>428</u>	<u>30</u>				
May	<u>412</u>	<u>31</u>				
June	<u>423</u>	<u>30</u>				
July	<u>430</u>	<u>31</u>				
Aug.	<u>431</u>	<u>31</u>				
Sept.	<u>421</u>	<u>30</u>				
Oct.	<u>424</u>	<u>31</u>				
Nov.	<u>427</u>	<u>30</u>				
Dec.	<u>419</u>	<u>31</u>				

Well tests and the results during reporting period:

RECEIVED
STATE CORPORATION COMMISSION
JAN 31 1985
CONSERVATION DIVISION
Wichita, Kansas

*For disposal wells complete page 1 plus section D page 2.
For enhanced recovery wells (repressuring, secondary, tertiary) complete both pages.
Prepare one form for each injection well (SWD and ER) but only one report of Section B
and C for each docket (project).

12/83 Form U3C