

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

DOCKET NO. 53,712-C [ C-5363 ]  
KCC KDH

X SEC 2, T 22 S, R 19 [ ] West  
[x] East

ANNUAL REPORT OF PRESSURE MONITORING,  
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Unit 3 Well# W-30  
(if battery of wells, attach list with  
locations)  
Feet from ~~N~~/S section line 4970'

Operator License Number 5096

Feet from ~~W~~/E section line 2620'

Operator: James E. Russell Petr., Inc. Field Welda  
Name & 536 N. Highland  
Address Chanute, Kansas 66720

County Anderson

Contact Person G. Bob Barnett  
Phone (316) 431-2650

Disposal [ ] or Enhanced Recovery [ x ]

Person (s) responsible for monitoring well Delmer Lorange  
Was this well/project reported last year? [ x ] yes [ ] no  
List previous operator if new operator \_\_\_\_\_

I. INJECTION FLUID:

Type: Source: Quality:  
[ ] fresh water [ x ] produced water Total dissolved solids \_\_\_\_\_ ppm/mgm/liter  
[ x ] brine treated other: Miss. Additives Yes  
[ ] brine untreated (attach water analysis, if available)  
[ ] water/brine mixture

TYPE COMPLETION:

[ X ] tubing & packer packer setting depth 801 feet.  
[ ] packerless (tubing-no packer) Maximum authorized pressure 700 psi.  
[ ] tubingless (no tubing) Maximum authorized rate 150 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>337</u>	<u>31</u>	<u>620</u>	<u>610</u>		<u>610</u>
Feb.	<u>254</u>	<u>29</u>	<u>620</u>	<u>610</u>		<u>610</u>
Mar.	<u>353</u>	<u>31</u>	<u>620</u>	<u>600</u>		<u>600</u>
Apr.	<u>248</u>	<u>30</u>	<u>610</u>	<u>600</u>		<u>600</u>
May	<u>272</u>	<u>31</u>	<u>620</u>	<u>615</u>		<u>615</u>
June	<u>244</u>	<u>30</u>	<u>640</u>	<u>620</u>		<u>620</u>
July	<u>307</u>	<u>31</u>	<u>640</u>	<u>460</u>		<u>460</u>
Aug.	<u>440</u>	<u>31</u>	<u>600</u>	<u>520</u>		<u>520</u>
Sept.	<u>357</u>	<u>30</u>	<u>640</u>	<u>620</u>		<u>620</u>
Oct.	<u>273</u>	<u>31</u>	<u>640</u>	<u>630</u>		<u>630</u>
Nov.	<u>356</u>	<u>30</u>	<u>620</u>	<u>580</u>		<u>580</u>
Dec.	<u>313</u>	<u>31</u>	<u>620</u>	<u>590</u>		<u>590</u>

Well tests and the results during reporting period:

\*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).