	Reportin	g Period	7-84 to 7-	85		-
CONSER 200 CO	CORPORATION CO VATION DIVISIO LORADO DERBY B A, KANSAS 6720	N - UIC SEC UILDING	TION		CC K 6 ,T 22 S,R	17.131 DHE [] West 12 [x] East
ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY				Lease Name <u>Jones</u> Well# <u>B-1</u> (if battery of wells, attach list with locations) Feet from N/§ section line 200		
Operat	or License Num	ber <u>7564</u>		Feet from W	/≰ section line_	3960
Operator: R&W Energies Inc. Name & Box 364 Address Madison, Kansas 66860			Field Fankhauser County Greenwood Disposal[]or Enhanced Recovery[xx]			
Contac Phone_	t Person <u>Ja</u> 316 437 2	y Rasmuss 829	en	3100001	Joi Elinancea	Recovery XX
Was th	(s) responsib is well/project revious operat	t reported	last year? [x Jyes [ssen]no Petroluem Comp	pany
Type: []f [x]b []b	resh water prine treated prine untreated water/brine mix	other:	oduced water	Additives	olved solids	
	OMPLETION:	iour c				
[xx]t []p	ubing & packer ackerless (tub ubingless (no	ing-no pack	er) Maximum Maximum	authorized i	ressure 100 rate350 bbl/	_psi. /day.
Month	Total Fluid Injected in Month (bbl)	Days of Injection	Maximum Injection Pressure	ell is on V Average Injection Pressure	Aver.Pressure Tubing to Casing Annulus	Pressure psig Casing to Surf. Pipe
Jan.	240	30	R 00	0	0	0
Feb.	240	30	100	0	0	0
Mar.	240	30	100	0	0	0
Apr.	240	30	100	0	0	0
May	240	30	100	0	00	0
June	240	30	100	0	0	0
July	240	30	100	0	0	0
Aug.	240	30	100	0	0	0
Sept.	240	30	100	0	0	0
Oct.	240	30	100	0	0	0
Nov.	240	30	100	0	0	0
Dec.	240	30	100	0	0	0

Well tests and the results during reporting period:

^{*}For disposal wells complete page 1 plus section IV 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 II and III for each docket (project).

Project	DOCKET #_E-17,131	[_] for 1984 & 1985				
<pre>II. Type of Secondary Recovery well)</pre>	(check one if appropr	riate; does not a	oply to disposal				
<pre>[]Controlled waterflood []Pressure maintenance</pre>							
Type of Tertiary Recovery Proj	ect (check one if appr	ropriate)					
[] Steam Flood [S]	[] Fire Flood [F]	[] Surfactant	Chemical Flood [C]				
[] CO2 Injection [0]	[] Air Injection [A	A][] N2 Injectio	on [N]				
[] Natural Gas Injection [G] Oil Producing Zone:	[] Polymer/Micellar Flood [P]	r[x]Other					
Name: Bartlesville	Depth 1900 feet.	Average Thicknes	ss 30 feet.				
Oil Gravity 38 API							
Production wells from this doc	ket:		*				
a. Total number producing during reporting year 4.							
b. Number drilled in reporting year o							
c. Number abandoned in report	ing year						
d. Total number of injection	wells assisting produc	ction this project	:o′				
III. Enter zeros in the currer gas was injected. If reall cases report a volume reflect total volumes simplease estimate the value	cords are incomplete, e for the current year nce initiation of the	please estimate t	the volumes, but in				
A. Liquid injected or dumped zone (BBLS) (from side of	d into producing ne for current year)	86.400					
B. Gas or air injected into	producing zone (MCF)						
C. Oil production from proje	ect area (BBLS) (Total)2160					
D. Oil production resulting recovery: (Oil recovered flood, Pressure Maintenant	d by Dumpflood, Water-	2160					
polymer-enhanced waterfle injection, alkaline cheme flood or gas injection, injection, or some combut excluding oil recovered by maintenance, or dump flood	ood, surfactant polyme ical injection, miscib steam or hot water ion process, but by waterflood, pressur	ele					
IV. I certify that I am person attachments and that I be	nally familiar with th lieve the information	e above informati to be true, accur	on and all				
			0				
Date 8-/1-85		Signature Su	Kassimi				
		Name JAy	KASMUSSEN				
Complete all blanks - add pages	if needed	Title Pe	RATOR				
somprese arr branks - add pages	ii needed.						

Copy to be retained for 5 years after filing date.