

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

DOCKET NO. E-15,815 [90,455-C]
 FCC KDHE

S/2 NW/4 EC 22, T 23 S, R 18 [] West
 COLONY "B" SOUTH UNIT [XX] East

ANNUAL REPORT OF PRESSURE MONITORING,
 FLUID INJECTION AND ENHANCED RECOVERY

Lease Name (N. Vezie) Well# 2A
 (if battery of wells, attach list with
 locations)
 feet from N/S section line 290

Operator License Number 5150

feet from W/E section line 50

Operator: MACK C. COLT, INC.
 Name & P.O. BOX 388
 Address IOLA, KANSAS 66749

Field COLONY WEST
 County ALLEN

Disposal [] or Enhanced Recovery [XXXXXX]

Contact Person DENNIS KERSHNER
 Phone (316) 365-3111

Person (s) responsible for monitoring well Terry Drybread, Charlie Tinsley

Was this well/project reported last year? [XXXX]yes []no

List previous operator if new operator SAME

I. INJECTION FLUID:

Type: [] fresh water Source: [XXXX] produced water Quality: total dissolved solids N/A ppm/mgm/liter
 [XXXX] brine treated other: Additives Nalco chemical formulation N/A
 [] 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 700 psi.
 [XXXX] 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.	899	31	450	410	NONE	NONE
Feb.	767	28	450	440	"	"
Mar.	482	31	450	450	"	"
Apr.	375	30	450	450	"	"
May	803	31	450	380	"	"
June	937	30	450	430	"	"
July	655	31	450	410	"	"
Aug.	562	31	460	410	"	"
Sept.	473	30	450	420	"	"
Oct.	409	31	460	450	"	"
Nov.	372	30	450	450	"	"
Dec.	359	31	450	445	"	"

Well tests and the results during reporting period:

*For disposal wells complete page 1 plus section B 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).

RECEIVED
 STATE CORPORATION COMMISSION FEB 10 1983 Form U3C

FEB 04 1985