

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

DOCKET NO. CR-5772 [ C-19041 ]  
 KCC KDHE

K

SEC 3, T 23 S, R 19 [ ] West  
 [ X ] East

ANNUAL REPORT OF PRESSURE MONITORING,  
 FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Minckley A Well# W-9  
 (if battery of wells, attach list with  
 locations)  
 Feet from W/S section line 440'

Operator License Number 5096

Feet from W/E section line 5280'

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

Field Colony Welda  
 County Anderson

Disposal [ ] or Enhanced Recovery [ X ]

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

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 [ ] 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:

[ ] tubing & packer packer setting depth \_\_\_\_\_ feet.  
 [ ] packerless (tubing-no packer) Maximum authorized pressure 700 psi.  
 [ X ] tubingless (no tubing) Maximum authorized rate 70 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>261</u>	<u>31</u>	<u>540</u>	<u>440</u>		<u>440</u>
Feb.	<u>459</u>	<u>29</u>	<u>560</u>	<u>450</u>		<u>450</u>
Mar.	<u>351</u>	<u>31</u>	<u>500</u>	<u>430</u>		<u>430</u>
Apr.	<u>313</u>	<u>30</u>	<u>490</u>	<u>470</u>		<u>470</u>
May	<u>279</u>	<u>31</u>	<u>490</u>	<u>450</u>		<u>450</u>
June	<u>313</u>	<u>30</u>	<u>480</u>	<u>440</u>		<u>440</u>
July	<u>275</u>	<u>31</u>	<u>500</u>	<u>450</u>		<u>450</u>
Aug.	<u>483</u>	<u>31</u>	<u>500</u>	<u>480</u>		<u>480</u>
Sept.	<u>478</u>	<u>30</u>	<u>510</u>	<u>480</u>		<u>480</u>
Oct.	<u>536</u>	<u>31</u>	<u>550</u>	<u>510</u>		<u>510</u>
Nov.	<u>595</u>	<u>30</u>	<u>590</u>	<u>530</u>		<u>530</u>
Dec.	<u>626</u>	<u>31</u>	<u>550</u>	<u>530</u>		<u>530</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).

12/83 Form U3C

STATE CORPORATION COMMISSION

FEB 07 1985