

Reporting Period 1984

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

DOCKET NO. CP 118111 [ C 20426 ]  
KCC KDHE

X

SEC 22, T 23 S, R 23 [ ] West  
[ X ] East

ANNUAL REPORT OF PRESSURE MONITORING,  
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Crown # Well# 8-81  
(if battery of wells, attach list with  
locations)

Feet from N/S section line 1175

Operator License Number 5115

Feet from W/E section line 380

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

Field Munawana

County DeWberry

Contact Person G. E. Eickman?  
Phone 816-354-1970

Disposal [ ] or Enhanced Recovery [ ]

Person (s) responsible for monitoring well J. Lee Carter  
Was this well/project reported last year? [ X ] yes [ ] no  
List previous operator if new operator \_\_\_\_\_

I. INJECTION FLUID:

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

TYPE COMPLETION:

[ ] tubing & packer packer setting depth \_\_\_\_\_ feet.  
[ X ] packerless (tubing-no packer) Maximum authorized pressure 300 psi.  
[ ] tubingless (no tubing) Maximum authorized rate 200 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>881</u>	<u>22</u>	<u>300</u>	<u>295</u>	<u>0</u>	<u>N/A</u>
Feb.	<u>Shut In</u>					
Mar.	<u>/</u>					
Apr.	<u>/</u>					
May	<u>/</u>					
June	<u>/</u>					
July	<u>/</u>					
Aug.	<u>/</u>					
Sept.	<u>/</u>					
Oct.	<u>/</u>					
Nov.	<u>/</u>					
Dec.	<u>/</u>					

RECEIVED  
STATE CORPORATION COMMISSION

JAN 31 1985

Well tests and the results during reporting period:

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