

Reporting Period JAN DEC 1984

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

DOCKET NO. C-148510 [85-981C]
KCC / KDHE

SEC 35, T 24 S, R 20 [] West
[] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name WEATHERBIE Well# 100
(if battery of wells, attach list with
locations)

Feet from N/S section line 3300

Operator License Number 6037

Feet from W/E section line 460

Operator:
Name & Address INEXCO OIL COMPANY
RR 2
MORAN, KS. 66755

Field MORAN

County ALLEN

Contact Person KENNETH OGLE
Phone 1-316-237-4575

Disposal [] or Enhanced Recovery []

Person (s) responsible for monitoring well RUSSEL GUDER

Was this well/project reported last year? [] Yes [] No

List previous operator if new operator _____

I. INJECTION FLUID:

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

TYPE COMPLETION:

[] tubing & packer packer setting depth _____ feet.
[] packerless (tubing-no packer) Maximum authorized pressure _____ psi.
[] tubingless (no tubing) Maximum authorized rate _____ 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>46</u>	<u>9</u>	<u>40</u>	<u>40</u>	<u>0</u>	<u>0</u>
Feb.	<u>0</u>	<u>0</u>	<u>off</u>	<u>off</u>	<u>0</u>	<u>0</u>
Mar.	<u>0</u>	<u>0</u>	<u>off</u>	<u>off</u>	<u>0</u>	<u>0</u>
Apr.	<u>22</u>	<u>30</u>	<u>640</u>	<u>640</u>	<u>0</u>	<u>0</u>
May	<u>248</u>	<u>31</u>	<u>640</u>	<u>640</u>	<u>0</u>	<u>0</u>
June	<u>345</u>	<u>30</u>	<u>330</u>	<u>220</u>	<u>0</u>	<u>0</u>
July	<u>345</u>	<u>31</u>	<u>670</u>	<u>670</u>	<u>0</u>	<u>0</u>
Aug.	<u>307</u>	<u>31</u>	<u>660</u>	<u>660</u>	<u>0</u>	<u>0</u>
Sept.	<u>360</u>	<u>30</u>	<u>170</u>	<u>170</u>	<u>0</u>	<u>0</u>
Oct.	<u>474</u>	<u>31</u>	<u>170</u>	<u>170</u>	<u>0</u>	<u>0</u>
Nov.	<u>745</u>	<u>30</u>	<u>660</u>	<u>660</u>	<u>0</u>	<u>0</u>
Dec.	<u>696</u>	<u>31</u>	<u>680</u>	<u>680</u>	<u>0</u>	<u>0</u>

Well tests and the results during reporting period:

MUT TEST 4-9-84

*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).

STATE CORPORATION COMMISSION
12/83 Form U3C

JAN 18 1985

CONSERVATION DIVISION
Wichita, Kansas