

Reporting Period JAN DEC 1984

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

DOCKET NO. C-14-856 [85-981-C]

KCC

KDHE

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

SEC 34, T 24 S, R 20 [] West
[] East

Operator License Number 6032

Lease Name WINSLOW Well# 132
(if battery of wells, attach list with
locations)

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

Feet from N/S section line 3770

Feet from W/E section line 3470

Contact Person KENNETH OGLE
Phone 1-316-737-4575

Field MORAN

County ALLEN

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 produced water Quality: Total dissolved solids _____ ppm/mgm/liter
 brine treated other: _____ Additives _____
 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 _____ 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	Pressure psig Casing to Surf. Pipe
Jan.	<u>334</u>	<u>31</u>	<u>530</u>	<u>530</u>	<u>0</u>	<u>0</u>
Feb.	<u>483</u>	<u>99</u>	<u>520</u>	<u>520</u>	<u>0</u>	<u>0</u>
Mar.	<u>103</u>	<u>31</u>	<u>400</u>	<u>400</u>	<u>0</u>	<u>0</u>
Apr.	<u>413</u>	<u>30</u>	<u>440</u>	<u>440</u>	<u>0</u>	<u>0</u>
May	<u>795</u>	<u>31</u>	<u>380</u>	<u>380</u>	<u>0</u>	<u>0</u>
June	<u>280</u>	<u>30</u>	<u>320</u>	<u>320</u>	<u>0</u>	<u>0</u>
July	<u>348</u>	<u>31</u>	<u>420</u>	<u>420</u>	<u>0</u>	<u>0</u>
Aug.	<u>33</u>	<u>31</u>	<u>400</u>	<u>400</u>	<u>0</u>	<u>0</u>
Sept.	<u>321</u>	<u>30</u>	<u>400</u>	<u>400</u>	<u>0</u>	<u>0</u>
Oct.	<u>605</u>	<u>31</u>	<u>450</u>	<u>450</u>	<u>0</u>	<u>0</u>
Nov.	<u>547</u>	<u>30</u>	<u>470</u>	<u>470</u>	<u>0</u>	<u>0</u>
Dec.	<u>497</u>	<u>31</u>	<u>470</u>	<u>470</u>	<u>0</u>	<u>0</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).

STATE CORPORATION COMMISSION 12/83 Form U3C

'JAN 18 1985'