

Reporting Period JAN DEC 1984

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

DOCKET NO. C-14856 [85-981 C]
KCC KDHE

SEC 35, T 24 S, R 70 [☐] West
[☒] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name KRIEGER Well# 1-A-5
(if battery of wells, attach list with
locations)

Feet from N/S section line 1730

Operator License Number 6037

Feet from W/E section line 7130

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

Field MORAN

County ALLEN

Contact Person KENNETH COLE
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: Source: Quality:
[☐] fresh water [☒] produced water 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 799 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>402</u>	<u>25</u>	<u>670</u>	<u>670</u>	<u>0</u>	<u>0</u>
Feb.	<u>562</u>	<u>29</u>	<u>560</u>	<u>560</u>	<u>0</u>	<u>0</u>
Mar.	<u>626</u>	<u>31</u>	<u>600</u>	<u>600</u>	<u>0</u>	<u>0</u>
Apr.	<u>657</u>	<u>30</u>	<u>600</u>	<u>600</u>	<u>0</u>	<u>0</u>
May	<u>768</u>	<u>31</u>	<u>550</u>	<u>550</u>	<u>0</u>	<u>0</u>
June	<u>855</u>	<u>30</u>	<u>560</u>	<u>560</u>	<u>0</u>	<u>0</u>
July	<u>803</u>	<u>31</u>	<u>590</u>	<u>590</u>	<u>0</u>	<u>0</u>
Aug.	<u>672</u>	<u>31</u>	<u>560</u>	<u>560</u>	<u>0</u>	<u>0</u>
Sept.	<u>666</u>	<u>30</u>	<u>600</u>	<u>600</u>	<u>0</u>	<u>0</u>
Oct.	<u>818</u>	<u>31</u>	<u>610</u>	<u>610</u>	<u>0</u>	<u>0</u>
Nov.	<u>729</u>	<u>30</u>	<u>610</u>	<u>610</u>	<u>0</u>	<u>0</u>
Dec.	<u>763</u>	<u>31</u>	<u>590</u>	<u>590</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).

12/83 Form U3C

JAN 18 1985