Reporting Period 1-1-83 thru 12-31-84

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

X

DOCKET NO. C-3091 (KCC) [43,350-C (KDHE)]

W½ NW¼ SE 34, T 24 S, R 21 [ ] West [XX] East

Lease Name Newton Well# 25A
(if battery of wells, attach list with locations)

Feet from N/S section line 170

Feet from E/W section line 690

Field BRONSON-XENIA

County ALLEN

Disposal [ ] or Enhanced Recovery [XXXXXX]

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Operator License Number 5150

Operator:
Name & Address MACK C. COLT, INC.
P.O.BOX 388
IOLA, KANSAS 66749

Contact Person Dennis Kershner
Phone (316) 365-3111

Person (s) responsible for monitoring well Tom Norman, Russel Ross, Vern Wright
Was this well/project reported last year? [XXXX] yes [ ] no
List previous operator if new operator SAME

I. INJECTION FLUID:

Type:
[ ] fresh water
[XXXX] brine treated
[ ] brine untreated
[ ] water/brine mixture

Source:
[XXXXX] produced water
other: _____

Quality:
Total dissolved solids N/A ppm/pgm/liter
Additives Nalco chemical formulation N/A
(attach water analysis, if available)

TYPE COMPLETION:

[ ] tubing & packer
[ ] packerless (tubing-no packer)
[XXXX] tubingless (no tubing)

packer setting depth _____ feet.
Maximum authorized pressure 450 psi.
Maximum authorized rate 150 bbl/day.

Month	Total Fluid Injected in Month (bbl)	Days of Injection	Maximum Injection Pressure	Average Injection Pressure	Avg. Pressure Tubing to Casing Annulus	Pressure psig Casing to Surf. Pipe
Jan.	442	31	450	450	NONE	NONE
Feb.	363	28	450	450	"	"
Mar.	375	31	450	450	"	"
Apr.	353	30	450	450	"	"
May	277	31	450	450	"	"
June	410	30	450	450	"	"
July	362	31	450	450	"	"
Aug.	364	31	450	450	"	"
Sept.	332	30	450	450	"	"
Oct.	392	31	450	450	"	"
Nov.	364	30	450	450	"	"
Dec.	327	31	450	450	"	"

Well tests and the results during reporting period:

*For disposal wells complete page 1 plus section I page 2.
For enhanced recovery wells (repressuring, secondary, tertiary) complete both pages.
Prepare one form for each injection well (SWI and ER) but only one report of Section B and C for each docket (project).

RECEIVED
STATE CORPORATION COMMISSION

12/83 Form U3C

FEB 04 1985

CONSERVATION DIVISION
Wichita, Kansas