

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

DOCKET NO. C-4497 [49,536-C]
KCC KDHE

X SW/4 SEC 31, T 24 S, R 13 [] West
[x] East

**ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY**

Lease Name DINIUS Well# 24
(if battery of wells, attach list with locations)

Feet from S section line 1,580 Ft.

Operator License Number 5596

Feet from W section line 550 Ft.

Operator: Bird & Hanley
Name & Route #1 Box 82
Address Toronto, Kansas 66777

Field Quincy

County Greenwood

Contact Person Robert Hays
Phone 316-637-2340

Disposal [] or Enhanced Recovery [xxx]

Person (s) responsible for monitoring well James Wright

Was this well/project reported last year? [xx] yes [] no

List previous operator if new operator _____

I. INJECTION FLUID:

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

TYPE COMPLETION:

[xxx] tubing & packer packer setting depth 1,589 feet.
[] packerless (tubing-no packer) Maximum authorized pressure 750 psi.
[] tubingless (no tubing) Maximum authorized rate 150 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>1,180</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Feb.	<u>1,079</u>	<u>29</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Mar.	<u>779</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Apr.	<u>947</u>	<u>29</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
May	<u>1,499</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
June	<u>992</u>	<u>30</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
July	<u>1,241</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Aug.	<u>1,178</u>	<u>30</u>	<u>400</u>	<u>25</u>	<u>0</u>	<u>0</u>
Sept.	<u>1,073</u>	<u>29</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Oct.	<u>1,577</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Nov.	<u>1,277</u>	<u>30</u>	<u>500</u>	<u>89</u>	<u>0</u>	<u>0</u>
Dec.	<u>1,000</u>	<u>30</u>	<u>500</u>	<u>50</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

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