

Reporting Period Jan. 1984 - Dec. 1984

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

DOCKET NO. E-11,737 [75,999-C]
KCC KDHE

X
NE/4 SEC 14, T 25 S, R 8 [] West
[xx] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name DUNN-WELSH Well# 16
(if battery of wells, attach list with
locations)

Feet from N/E section line 2310

Operator License Number 5337

Feet from W/E section line 1650

Operator: Nadel and Gussman
Name & 3232 First National Tower
Address Tulsa, OK 74103

Field Teichgraeber

County Greenwood

Contact Person M. R. Taylor
Phone 918/583-3333

Disposal [] or Enhanced Recovery [XX]

Person (s) responsible for monitoring well Ray Deeder
Was this well/project reported last year? []yes [XX]no
List previous operator if new operator _____

I. INJECTION FLUID:

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

TYPE COMPLETION:

[XX] tubing & packer packer setting depth 2290 feet.
[] packerless (tubing-no packer) Maximum authorized pressure 1500 psi.
[] tubingless (no tubing) Maximum authorized rate 200 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.	NOTE: INJECTION WILL COMMENCE IN THIS WELL DURING 1985 WAITING ON MECHANICAL INTEGRITY TEST.					
Feb.	_____	_____	_____	_____	_____	_____
Mar.	_____	_____	_____	_____	_____	_____
Apr.	_____	_____	_____	_____	_____	_____
May	_____	_____	_____	_____	_____	_____
June	_____	_____	_____	_____	_____	_____
July	_____	_____	_____	_____	_____	_____
Aug.	_____	_____	_____	_____	_____	_____
Sept.	_____	_____	_____	_____	_____	_____
Oct.	_____	_____	_____	_____	_____	_____
Nov.	_____	_____	_____	_____	_____	_____
Dec.	_____	_____	_____	_____	_____	_____

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).

RECEIVED 12/83 Form U3C
STATE CORPORATION COMMISSION

FEB 19 1985