

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

DOCKET NO. 107,791-C [C-18,297
KCC KDHE

SEC 22 , T 25 S, R 21 [] West
[X] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Ludlum Well# W-2
(if battery of wells, attach list with
locations)
Feet from ~~X~~/S section line 2210'

Operator License Number 5096

Feet from ~~X~~/E section line 3390'

Operator: James E. Russell Petr., Inc.
Name & 536 North Highland
Address Chanute, Kansas 66720

Field Bronson - Xenia

County Allen

Disposal [] for Enhanced Recovery [X]

Contact Person G. Bob Barnett
Phone (316) 431-2650

Person (s) responsible for monitoring well Don Mohler
Was this well/project reported last year? [X] Yes [] No
List previous operator if new operator _____

I. INJECTION FLUID:

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

TYPE COMPLETION:

[] tubing & packer packer setting depth _____ feet.
[] packerless (tubing-no packer) Maximum authorized pressure 400 psi.
[X] 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.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Feb.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Mar.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Apr.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
May	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
June	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
July	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Aug.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Sept.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Oct.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Nov.	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>		<u>0</u>
Dec.	<u>0</u>	<u>0</u>	<u>0</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).