

Reporting Period July to Dec. of 1984

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

DOCKET NO. CP108235 [E-21-464]
KCC KDHE

X SEC 10, T 26 S, R 20 [] West
[X] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name And Well# R-1
(if battery of wells, attach list with
locations)

Feet from N/S section line 2273

Operator License Number 5579

Feet from N/E section line 412

Operator: Oreiling Exploration
Name &
Address A. F. Oreiling
Box 457 Holly, Co. 81047

Field Siebert

County Allen

Contact Person A. F. Oreiling
Phone 303 537-6894

Disposal[] or Enhanced Recovery[xx]

Person (s) responsible for monitoring well A. F. Oreiling
Was this well/project reported last year? [X] yes [] no
List previous operator if new operator _____

I. INJECTION FLUID:

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

TYPE COMPLETION:

[X] tubing & packer cemented packer setting depth _____ 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.	_____	_____	_____	_____	_____	_____
Feb.	_____	_____	_____	_____	_____	_____
Mar.	_____	_____	_____	_____	_____	_____
Apr.	_____	_____	_____	_____	_____	_____
May	_____	_____	_____	_____	_____	_____
June	_____	_____	_____	_____	_____	_____
July	<u>272</u>	<u>13</u>	<u>250</u>	_____	_____	_____
Aug.	<u>195</u>	<u>31</u>	<u>250</u>	_____	_____	_____
Sept.	<u>255</u>	<u>30</u>	<u>250</u>	_____	_____	_____
Oct.	<u>51</u>	<u>5</u>	<u>150</u>	_____	_____	_____
Nov.	<u>175</u>	<u>30</u>	<u>250</u>	_____	_____	_____
Dec.	<u>172</u>	<u>31</u>	<u>300</u>	_____	_____	_____

Well tests and the results during reporting period:

*For disposal wells complete page 1 plus section IV 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 II and III for each docket (project).

RECEIVED 12/83 Form U3C
STATE CORPORATION COMMISSION

FEB 08 1985

Project Water Flood DOCKET # CP108235 [C-21-464] for 1984

II. Type of Secondary Recovery (check one if appropriate; does not apply to disposal well)

- ☐ Controlled waterflood [W]
☐ Pressure maintenance [P]
☐ Dump flood [D]

Type of Tertiary Recovery Project (check one if appropriate)

- ☐ Steam Flood [S] ☐ Fire Flood [F] ☐ Surfactant Chemical Flood [C]
☐ CO2 Injection [O] ☐ Air Injection [A] ☐ N2 Injection [N]
☐ Natural Gas Injection [G] ☐ Polymer/Micellar Flood [P] ☐ Other

Oil Producing Zone:

Name: Bartlesville Depth 702 feet. Average Thickness 9 feet.

Oil Gravity 30 API

Production wells from this docket:

- a. Total number producing during reporting year 2.
b. Number drilled in reporting year 5.
c. Number abandoned in reporting year None.
d. Total number of injection wells assisting production this project 1.

III. Enter zeros in the current year column only if no oil was produced or no water or gas was injected. If records are incomplete, please estimate the volumes, but in all cases report a volume for the current year. The cumulative column should reflect total volumes since initiation of the project. If records are incomplete please estimate the values.

	<u>Current Year</u>	<u>Cumulative</u>
A. Liquid injected or dumped into producing zone (BBLs) (from side one for current year)	<u>1120</u>	<u></u>
B. Gas or air injected into producing zone (MCF)	<u></u>	<u></u>
C. Oil production from project area (BBLs) (Total)	<u></u>	<u></u>
D. Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	<u>To early to tell</u>	<u></u>
E. Oil recovered by <u>Tertiary Recovery</u> such as polymer-enhanced waterflood, surfactant polymer injection, alkaline chemical injection, miscible flood or gas injection, steam or hot water injection, or some combustion process, <u>but excluding</u> oil recovered by waterflood, pressure maintenance, or dump flood operations.	<u>None</u>	<u></u>

IV. I certify that I am personally familiar with the above information and all attachments and that I believe the information to be true, accurate, and complete.

Date 1-31-1985

Signature A. F. O'neiling

Name A. F. O'neiling

Title Operator

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.