

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

DOCKET NO. 92,029-C [EC-16089]
 KCC KDHE

SEC 24, T 16 S, R 14 [] West
 [] East

ANNUAL REPORT OF PRESSURE MONITORING,
 FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Siemsen Well# 6
 (if battery of wells, attach list with
 locations)
 Feet from N/S section line 990'

Operator License Number 6593

Feet from W/E section line 660'

Operator: Coastal Oil & Gas Corporation
 Name & P. O. Box 1332
 Address Amarillo, Texas 79189

Field Trapp

County Russell Barton

Disposal [] or Enhanced Recovery []

Contact Person Ray Bradley
 Phone 806/372-8121

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

I. INJECTION FLUID:

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

TYPE COMPLETION:

[] tubing & packer packer setting depth 2963 feet.
 [] packerless (tubing-no packer) Maximum authorized pressure 300 psi.
 [] tubingless (no tubing) Maximum authorized rate 700 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>3979</u>					
Feb.	<u>3477</u>					
Mar.	<u>3508</u>					
Apr.	<u>3416</u>					
May	<u>3660</u>					
June	<u>3172</u>					
July	<u>1098</u>					
Aug.	<u>1464</u>					
Sept.	<u>854</u>					
* Oct.	<u>0</u>					<u>FEB 08 1985</u>
Nov.	<u>0</u>					CONSERVATION DIVISION Wichita, Kansas
Dec.	<u>0</u>					

Well tests and the results during reporting period:

* Disposal well has a downhole problem. It is to be PE'A in near future.

*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).

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: LKC Arbuckle Depth 3364 feet. Average Thickness _____ feet.

Oil Gravity 35.0 API

Production wells from this docket:

- a. Total number producing during reporting year 1.
 b. Number drilled in reporting year 0.
 c. Number abandoned in reporting year 0.
 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>25.0</u> <u>24994</u>	<u>2170</u> <u>2,169,666</u>
B. Gas or air injected into producing zone (MCF)	<u>0</u>	<u>0</u>
C. Oil production from project area (BBLs) (Total)	<u>1517</u> ^{1.5}	<u>457752</u> ⁴⁵⁸
D. Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	<u>1517</u> ^{1.5}	<u>34640</u> ^{34.6} (es)
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>0</u>	<u>0</u>

* Corrected

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 2-5-85

Signature Ray Bradley

Name Ray Bradley

Title Production Analyst

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.