Reporting Period 1984

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

DOCKET NO. E-17,191 [ ]
KCC KDHE

[XX] West
SE SEC 16 ,T 18 S,R 11 [ ] East

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Klepper Well# 2
(if battery of wells, attach list with locations)
Feet from N/S section line 990 FSL
Feet from W/E section line 990 FEL

Operator License Number 6883

Operator: Robinowitz Oil Company
Name & Address 6650 S. Lewis
Tulsa, Ok. 74136

Field Ames

County Barton

Disposal[ ]or Enhanced Recovery[XX]

Contact Person C. E. Son
Phone (918) 494-4034

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

I. INJECTION FLUID:

Type:
[ ]fresh water
[ ]brine treated
[XX]brine untreated
[ ]water/brine mixture

Source:
[XX]produced water
other:

Quality:
Total disolved solids 63,100 ppm/mgm/liter
Additives
(attach water analysis, if available)

TYPE COMPLETION:

[XX]tubing & packer
[ ]packerless (tubing-no packer)
[ ]tubingless (no tubing)

packer setting depth 3,202 feet.
Maximum authorized pressure 500 psi.
Maximum authorized rate 800 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.	4,330	31	Vacuum	Vacuum	0	0
Feb.	4,240	29				
Mar.	4,330	31				
Apr.	4,285	30				
May	4,330	31				
June	4,285	30				
July	4,330	31				
Aug.	4,330	31				
Sept.	4,285	30				
Oct.	4,285	30				
Nov.	4,330	31				
Dec.						

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).

12/83 Form U3C

Project Klepper (Ames) DOCKET # C-17,191 [ ] for 1984

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

[XX] 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: Lansing Depth 3045 feet. Average Thickness 20 feet.

Oil Gravity 40 API

Production wells from this docket:

a. Total number producing during reporting year 3.

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.

		Current Year	Cumulative
A.	Liquid injected or dumped into producing zone (BBLS) (from side one for current year)	51.7 51,690	480 480,342
B.	Gas or air injected into producing zone (MCF)		
C.	Oil production from project area (BBLS) (Total)	3,117 3.1	45,969 46.0
D.	Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	1.0 950	4.6 4,550
E.	Oil recovered by Tertiary Recovery such as polymer-enhanced waterflood, surfactant polymer injection, alkaline chemical injection, miscible flood or gas injection, steam or hot water injection, or some combution process, but excluding oil recovered by waterflood, pressure maintenance, or dump flood operations.		

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 February 6, 1985

RECEIVED
STATE CORPORATION COMMISSION
FEB
CONSERVATION DIVISION
Wichita, Kansas

Signature C E Son

Name Charles E. Son

Title Operations Manager

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.