

Reporting Period 1984

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

DOCKET NO. CR-78234 [E-21,135]  
KCC KDHE

NW/4 SEC 6, T 18 S, R 12  West  
 East

ANNUAL REPORT OF PRESSURE MONITORING,  
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Eveleigh Well# 1  
(if battery of wells, attach list with  
locations)  
Feet from N/S section line \_\_\_\_\_

Operator License Number #5533

Feet from W/E section line \_\_\_\_\_

Operator: Arrowhead Petroleum, Inc.  
Name & P. O. Box 8287-Munger Station  
Address Wichita, Kansas 67208

Field Redwing  
County Barton

Contact Person Paul A. Seymour, III  
Phone (316) 681-3921

Disposal  or Enhanced Recovery

Person (s) responsible for monitoring well A. D. Belt  
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 \_\_\_\_\_ 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.	<u>2400</u>	<u>30</u>	_____	_____	_____	_____
Feb.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Mar.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Apr.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
May	<u>"</u>	<u>"</u>	_____	_____	_____	_____
June	<u>"</u>	<u>"</u>	_____	_____	_____	_____
July	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Aug.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Sept.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Oct.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Nov.	<u>"</u>	<u>"</u>	_____	_____	_____	_____
Dec.	<u>"</u>	<u>"</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).

Project \_\_\_\_\_ DOCKET # \_\_\_\_\_ [ \_\_\_\_\_ ] for 198 \_\_\_\_\_

- 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: Lansing Formation                      Depth 3151 feet.                      Average Thickness 3 feet.

Oil Gravity 42° API

Production wells from this docket:

- a. Total number producing during reporting year 2.
- 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>28,800</u> <i>28.8</i>	<u>57,600</u> <i>57.6</i>
B. Gas or air injected into producing zone (MCF)	_____	_____
C. Oil production from project area (BBLS) (Total)	_____	_____
D. Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	<u>4,516.14</u> <i>4.5</i>	_____
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.	_____	_____

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 5-24-85

Signature *Paul A. Seymour III*  
Name Paul A. Seymour, III  
Title Vice-President

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.