

Reporting Period Jan. 1984 - Dec. 1984

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

DOCKET NO. 14,055

X
KCC

[63,254-C]

KDHE

West

NW/4 SEC 3 T 19 S, R 11 [] East

Lease Name BIRZER Well# 8

(if battery of wells, attach list with
locations)

Feet from N section line 330

Feet from E section line 330

Field St. Peter East

County Barton

Disposal [] or Enhanced Recovery []

Operator License Number 5337

Operator: Nadel and Gussman
Name & 3232 First National Tower
Address Tulsa, OK 74103

Contact Person M. R. Taylor
Phone 918/583-3333

Person (s) responsible for monitoring well Frank Neff

Was this well/project reported last year? Yes No

List previous operator if new operator _____

I. INJECTION FLUID:

Type: fresh water produced water Quality: 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 3092 feet.
 packerless (tubing-no packer) Maximum authorized pressure 500 psi.
 tubingless (no tubing) Maximum authorized rate 150 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>583</u>	<u>31</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Feb.	<u>505</u>	<u>29</u>				
Mar.	<u>519</u>	<u>31</u>				
Apr.	<u>510</u>	<u>30</u>				
May	<u>775</u>	<u>31</u>				
June	<u>575</u>	<u>30</u>				
July	<u>579</u>	<u>31</u>				
Aug.	<u>803</u>	<u>31</u>				
Sept.	<u>806</u>	<u>30</u>				
Oct.	<u>929</u>	<u>31</u>				
Nov.	<u>847</u>	<u>30</u>				
Dec.	<u>872</u>	<u>31</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).

SUMMARY SHEET

Project BIRZERDOCKET # E-14,055 [83,254-C] 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 Other Flood [P]

Oil Producing Zone:

Name: Lansing-K.C. Depth 3100 feet. Average Thickness 50 feet.

Oil Gravity 41.0 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.

	Current Year	Cumulative
A. Liquid injected or dumped into producing zone (BBLS) (from side one for current year)	<u>8.3</u> 8,303	<u>1789</u> 1,788,647
B. Gas or air injected into producing zone (MCF)	<u>-0-</u>	<u>-0-</u>
C. Oil production from project area (BBLS) (Total)	<u>0.9</u> 915	<u>N/A</u>
D. Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	<u>0.9</u> 915	<u>N/A</u>
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 combustion process, but excluding oil recovered by waterflood, pressure maintenance, or dump flood operations.	<u>-0-</u> -0- -0- -0- -0-	<u>1,788,647</u> 1,788,647 N/A N/A -0-

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 2/12/85

Signature M. R. Taylor

Name M. R. Taylor

Title Manager of Production

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.