Reporting Period January-December 1984

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

DOCKET NO. ~~CR-1813~~ KCC [C-20,045] KDHE

SW/4 SEC 7 ,T 20 S,R 12 [x] West [ ] East

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Lease Name Schartz Well# 3
(if battery of wells, attach list with locations)
Feet from N/S section line 990'

Operator License Number 5354

Feet from W/E section line 990'

Operator: Name & Address: Southern States Oil Company, P.O. Box 1365, Great Bend, Kansas 67530

Field Sunny Valley

County Barton

Disposal[ ]or Enhanced Recovery[X]

Contact Person Claude Blakesley
Phone 316/792-2585

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

I. INJECTION FLUID:

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

Source:
[X]produced water
other:

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

TYPE COMPLETION:

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

packer setting depth 3097 feet.
Maximum authorized pressure 1000 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.	9,128	31	400	400	0	0
Feb.	8,181	29	400	400	0	0
Mar.	9,393	31	400	400	0	0
Apr.	8,889	30	400	400	0	0
May	9,330	31	400	400	0	0
June	9,090	30	400	400	0	0
July	10,199	31	400	400	0	0
Aug.	10,122	31	400	400	0	0
Sept.	9,870	30	400	400	0	0
Oct.	10,196	31	400	400	0	0
Nov.	9,888	30	400	400	0	0
Dec.	10,192	31	400	400	0	0

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).

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STATE CORPORATION COMMISSION
FEB 15 1985

12/83 Form U3C

Project Schartz # 3 DOCKET # CR-1813 [C-20,045] for 1984

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

[ ]Controlled waterflood [W]
[X]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] [X] Other Water

Oil Producing Zone:

Name: LKC Depth 3368 feet. Average Thickness 32 feet.

Oil Gravity 36.0 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)	114 114,478	317 317,149
B.	Gas or air injected into producing zone (MCF)	0	0
C.	Oil production from project area (BBLS) (Total)	2.0 1,998	8.1 8,141
D.	Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	2.0 1,998	8.1 8,141
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 13, 1985

Signature Claude Blakesley

Name Claude Blakesley

Title General Superintendent

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.

12/83 FORM U3C