

Reporting Period January - December 1984

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

X DOCKET NO. 76891-C [E-11972]
KCC KDHE

SEC 14 , T 20 S, R 12 [X] West
[] East

Lease Name Buckbee Well# 5

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Operator License Number 5816

Operator: Gulf Oil Corporation
Name & P.O. Box 12116
Address Oklahoma City, OK 73157

Feet from N/S section line _____

Feet from W/E section line NW NE SW

Field Workman, N. W.

County Barton

Disposal [] or Enhanced Recovery [X]

Contact Person Mr. J.E. (Jim) Marshall
Phone (405) 949-7000 or 949-7032

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

I. INJECTION FLUID:

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

TYPE COMPLETION:

[] tubing & packer packer setting depth NA feet.
[X] packerless (tubing-no packer) Maximum authorized pressure 1500 psi.
[] tubingless (no tubing) Maximum authorized rate 300 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>0</u>	<u>0</u>	<u>-</u>	<u>-</u>	<u>No RECORD</u>	<u>No RECORD</u>
Feb.	<u>0</u>	<u>0</u>	<u>-</u>	<u>-</u>	<u>" "</u>	<u>" "</u>
Mar.	_____	_____	_____	_____	_____	_____
Apr.	<u>Well was P+A'd on 02-21-84.</u>					
May	_____	_____	_____	_____	_____	_____
June	_____	_____	_____	_____	_____	_____
July	_____	_____	_____	_____	_____	_____
Aug.	_____	_____	_____	_____	_____	_____
Sept.	_____	_____	_____	_____	_____	_____
Oct.	_____	_____	_____	_____	_____	_____
Nov.	_____	_____	_____	_____	_____	_____
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 RECOVERED) but only one report of Section II and III for each docket (project).
STATE CORPORATION COMMISSION

FEB 21 1985
[OVER]

Project Buckbee DOCKET # 76891-C [C-11972] for 19 84

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: Arbuckle Depth 3373 feet. Average Thickness 2 feet.

Oil Gravity 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 1.
d. Total number of injection wells assisting production this project 0.

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>0</u>	<u>97.8</u> <u>97,759</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>0</u>	<u>3,590</u> ^{3.6}
D. Oil production resulting from secondary recovery: (Oil recovered by Dumpflood, Waterflood, Pressure Maintenance by water injection)	<u>0</u>	<u>3,590</u> ^{3.6}
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>

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 01-31-85

Signature D. K. Moore

Name D. K. Moore

Title Senior Clerk

Complete all blanks - add pages if needed.

Copy to be retained for 5 years after filing date.