

Reporting Period 1984

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

DOCKET NO. 39,621-C [E-2334]
KCC KDHE

SE SE NE SEC 29, T 21 S, R 1 [☒] West
[] East

ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY

Lease Name F. A. Hetzke Well# 12
(if battery of wells, attach list with
locations)

Feet from N/S section line 2970

Operator License Number 5663

Feet from W/E section line 330

Operator: HESS OIL COMPANY
Name & P. O. BOX 905
Address McPHERSON, KANSAS 67460

Field Graber

County McPherson

Disposal [] for Enhanced Recovery [☒]

Contact Person Jim Hess
Phone 316-241-4640

Person (s) responsible for monitoring well Tom Bruce
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 34,222 ppm/mgm/liter
[☒] brine treated other: _____ Additives _____
[] brine untreated (attach water analysis, if available)
[] water/brine mixture

TYPE COMPLETION:

[☒] tubing & packer packer setting depth 3254 feet.
[] packerless (tubing-no packer) Maximum authorized pressure 0 psi.
[] tubingless (no tubing) Maximum authorized rate 700 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>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Feb.	<u>7865</u>	<u>29</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Mar.	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Apr.	<u>7865</u>	<u>30</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
May	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
June	<u>7865</u>	<u>30</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
July	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Aug.	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Sept.	<u>7865</u>	<u>30</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Oct.	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Nov.	<u>7865</u>	<u>30</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</u>
Dec.	<u>7865</u>	<u>31</u>	<u>0</u>	<u>vac</u>	<u>0</u>	<u>0</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).

12/83 Form U3C

FEB 26 1985