

**KANSAS CORPORATION COMMISSION
MULTIPOINT BACK PRESSURE TEST**

Inv 4185

FORM G-1
8-7-58

TYPE TEST: ☒ Initial ☐ Annual ☐ Special		TEST DATE: 3/6/2001	
COMPANY American Warrior		LEASE Witthuhn	
WELL NO. 4-35			
COUNTY Ness	LOCATION 150'E SW SE s	SECTION 35	TWP 18s 21w
FIELD Chase		PIPELINE CONNECTION	
COMPLETION DATE 9/20/1999	PLUG BACK DEPTH TOTAL DEPTH	2350	
PACKER SET AT			
CASING SIZE 4.500	WT. 9.500	ID 4.090	SET AT 2355
PERF. 2257		TO 2317	
TUBING SIZE 2.375	WT. 4.700	ID 1.995	SET AT 2330
PERF.		TO	
TYPE COMPLETION (Describe) perforated		TYPE FLUID PRODUCTION water	
PRODUCING THRU (Annulus/Tubing) annulus		RESERVOIR TEMPERATURE F 90	
BAR PRESS - Pa 14.4 psia			
GAS GRAVITY - Gg .753	% CARBON DIOXIDE .259	% NITROGEN 47.847	
API GRAVITY OF LIQUID			
VERTICAL DEPTH (H) 2287	TYPE METER CONN.		PROVER SIZE 2"
REMARKS			

OBSERVED SURFACE DATA

RATE NO.	ORIFICE SIZE in.	(PROVER) PRESSURE psig	DIFF. (h _w) (h _t)	FLOWING TEMP. t.	WELLHEAD TEMP. t.	CASING WELLHEAD PRESS.		TUBING WELLHEAD PRESS.		DURATION HOURS	LIQUID PROD. Bbls.
						psig	(P _w) (P _t) (P _c) psia	psig	(P _w) (P _t) (P _c) psia		
SHUT-IN						587	601				
1.	.250	56.00		50		568	582			.50	
2.	.250	124.00		56		548	562			.50	
3.	.375	108.00		54		511	525			.50	
4.	.500	78.00		52		464	478			.50	

FLOW STREAM ATTRIBUTES

RATE NO.	COEFFICIENT (F _p) Mcfd	(PROVER) PRESSURE psia	EXTENSION $\sqrt{P_m \times H_w}$	GRAVITY FACTOR Fg	FLOWING TEMP FACTOR Ft	DEVIATION FACTOR Fpv	RATE OF FLOW Q Mcfd	GOR	G _m
1.	1.120	70.4	70.40	1.1522	1.0098	1.0037	92		.753
2.	1.120	138.4	138.40	1.1522	1.0039	1.0070	180		.753
3.	2.440	122.4	122.40	1.1522	1.0058	1.0063	348		.753
4.	4.388	92.4	92.40	1.1522	1.0078	1.0048	473		.753

PRESSURE CALCULATION

RATE NO.	P _t psia	P _c psia	P _w psia	(P _c) ² Thousands	(P _w) ² Thousands	PLOTING POINTS		% SHUT-IN 100 $\left[\frac{P_w - P_a}{P_c - P_a} \right]$
						(P _c) ² - (P _w) ² Thousands	Q Mcfd	
1.	582.4	601.4	582.4	361.7	339.2	22.5	92.1	96.8
2.	562.4	601.4	562.5	361.7	316.4	45.3	180.5	93.4
3.	525.4	601.4	525.6	361.7	276.3	85.4	348.3	87.1
4.	478.4	601.4	478.8	361.7	229.2	132.4	473.1	79.1

INDICATED WELLHEAD OPEN FLOW

1453

Mcfd @ 14.65 psia

"n" =

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated herein and that said report is true and correct. Executed this the 19 day of March, 2001

Witness (if any)

For Commission

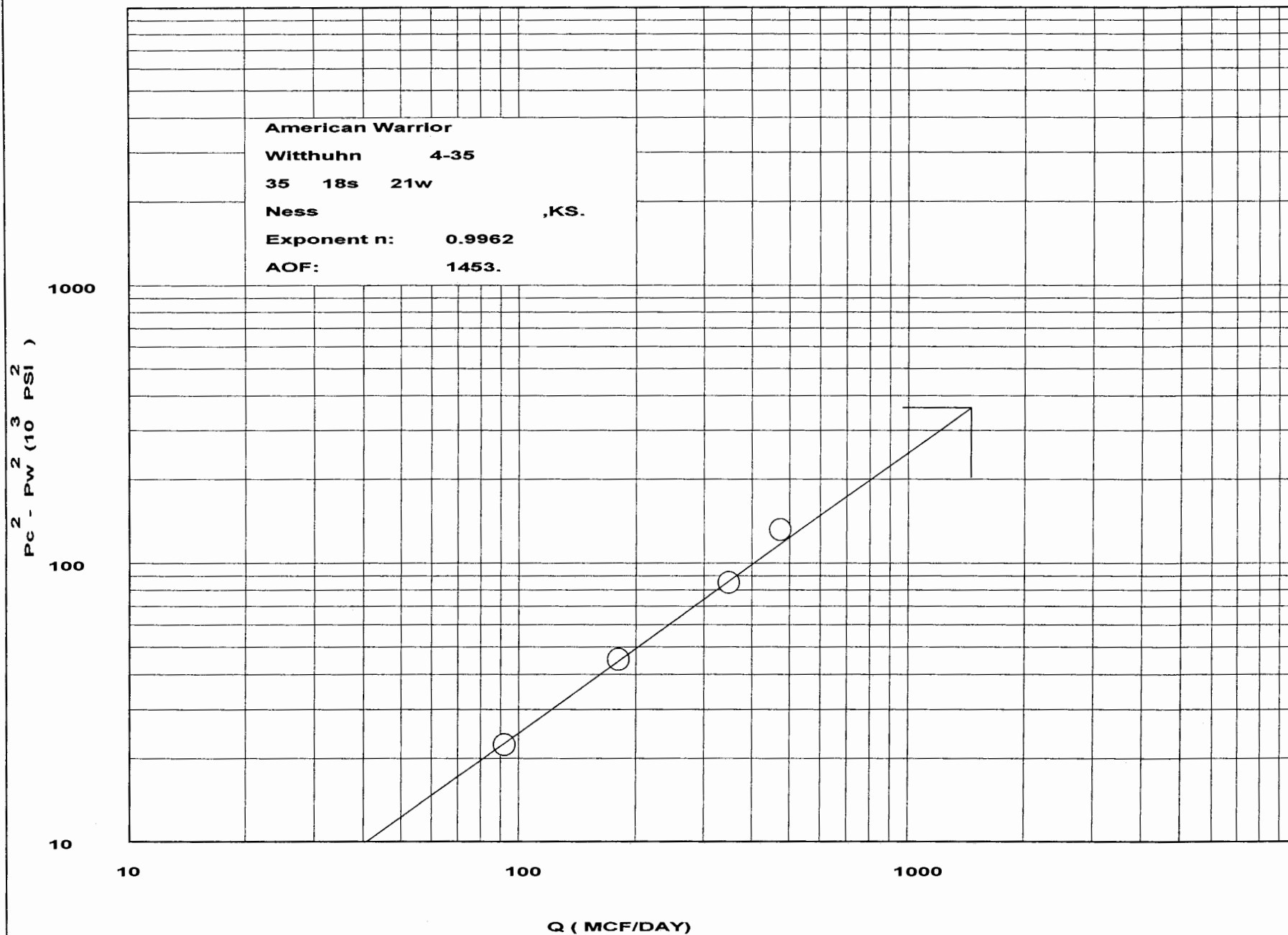
For Company

Checked by

GAS WELL BACK PRESSURE CURVE

WELL TESTER:

TEST DATE: 3/6/2001



**STATE OF KANSAS - CORPORATION COMMISSION
MULTI-PORT BACK PRESSURE TEST**

FORM CG-1 Rev.

TYPE TEST		Blind	Classed	Special	TEST DATE:	
COMPANY		LEASE		WELL NO.		
American Warrior, Inc.		Withuhn		4-35		
COUNTY	LOCATION	SECTION	TWP	RNG (BPM)	ACRES	
Ness	150' E SW SE NW	23	18 S	21 W	160	
API WELL NUMBER		RESERVOIR		PINNING CONNECTION		
15-135-24076		Chase				
COMPLETION DATE		FLUID BACK		PACKER SET AT		
September 20, 1999		TOTAL DEPTH 2340				
CASING SIZE	WT.	IS	SET AT	FEET	TO	
4 1/2	9.5	4.090	2335	2257-67, 2278-84, 2311-17	TO	
TUBING SIZE	WT.	IS	SET AT	FEET	TO	
2 3/8	4.7	1.995	2330			
TYPE COMPLETION (Describe)		TYPE FLOID PRODUCTION				
Perforated						
PRODUCING THRU		RESERVOIR TEMPERATURE °F			BAR PRESS. P.	
					144 PSI	
GAS GRAVITY - G_L		% CARBON DIOXIDE		% NITROGEN		API GRAVITY OF LIQUID
VERTICAL DEPTH (ft)		TYPE METER CONNECTION			(GAS) RUN (PROVED) SIZE	

REMARKS

OBSERVED DATA							DURATION OF TEST - IN		HR.
RATE NO.	CORRECTION SIZE in	ORIFICE (PROVED) PRESSURE P ₀ Psi	DEPT. (ft)	FLOWING TEMP. t	WELL-HEAD TEMP. t	CWG WELL-HEAD PRESS. P ₀ (P ₀ , P ₁ , P ₂) Psi	TSG WELL-HEAD PRESS. P ₀ (P ₀ , P ₁ , P ₂) Psi	FLOW DURATION (HOURS)	LIQUID PROD. Bbls
1									
2									
3									
4									
5									

RATE OF FLOW CALCULATIONS

RATE NO.	CORRECTION (P ₀ , P ₁) McM	(ORIFICE) (PROVED) PRESSURE P ₀ Psi	PRESS. EXTENSION $\sqrt{P_0 - P_1}$	GRAVITY FACTOR F _g	FLOWING TEMP. FACTOR F _t	DEVIATION FACTOR F _d	RATE OF FLOW Q McM	GOR (bbl/MMB)	Q _L
1									
2									
3									
4									
5									

PRESSURE CALCULATIONS

RATE NO.	P ₁ Psi	P ₂ Psi	P ₀ Psi	P ₀ ² THOUSANDS	P ₀ ² THOUSANDS	FLOWING POINTS		% SHUT-IN (P ₀ - P ₁) (P ₀ - P ₂)
						P ₀ - P ₁ THOUSANDS	Q McM	
1								
2								
3								
4								
5								

EXERCISE WELL-HEAD ONLY FLOW

MMB @ 14.5 PSI

T₀ =

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated herein, and that said report is true and correct. Executed this the _____ day of _____, 19____.

Witness (if any)

For Company

For Commission

Checked By (Rev. 10/98)

STATE OF KANSAS - CORPORATION COMMISSION
MULTIFLOW BACK FLOW TEST

FORM CC-1 Rev.

TYPE TEST		State	County	Section	TWP	Range (E/W)	Acres	TEST DATE
COMPANY		NAME	LOCATION	SECTION	TWP	Range (E/W)	Acres	WELL NO.
American Warrior Inc.		Withuhn	150' E SW SE NW	23	18 S	21 W	160	4-35
AP WELL NUMBER		RESERVOIR	FLOWLINE CONNECTION					
15-135-24076		Chase						
COMPLETION DATE		FLUID BACK		TOTAL DEPTH		PACKER SET AT		
September 20, 1999				2340				
Casing size		WT	ID	WT		ID		TO
4 1/2		9.5	4.090	2335		2257-67, 2278-84, 2311-17		
TUBING SIZE		WT	ID	SET AT		Packer		TO
2 3/8		4.7	1.995	2330				
TYPE CONNECTION (Double)		TYPE FLUID PRODUCTION						
Perforated								
PRODUCING THRU		RESERVOIR TEMPERATURE °F				BAR PRESS - P.		
						14.8 psig		
GAS GRAVITY - G _g		S CARBON DIOXIDE		S HYDROGEN		API GRAVITY OF LIQUID		
VERTICAL DEPTH (ft)		TYPE METER CONNECTION				METER RUN (PROVED) SIZE		

OBSERVED DATA								DURATION OF TEST - H.	
RATE NO.	ORIFICE SIZE in	ORIFICE PROVED PRESSURE P ₀ psig	DEPTH (ft)	FLOWING TEMP t	WELL HEAD TEMP t	CIR WELLHEAD PRESS P ₀ (P ₀ , P ₁) P ₀ psia	TSG WELLHEAD PRESS P ₁ (P ₁ , P ₂) P ₁ psia	FLOW DURATION (HOURS)	LIQUID PROD. Bbls
1									
2									
3									
4									
5									

RATE NO.	COMPRESSIB. (P ₀ , P ₁) McM	ORIFICE PROVED PRESSURE P ₀ psia	PRESS. EXTENSION $\sqrt{P_0 - P_1}$	GRAVITY FACTOR F _g	FLOWING TEMP FACTOR F _t	DEVIATION FACTOR F _d	RATE OF FLOW Q McM	GOR (SCF/M)	G _g
1									
2									
3									
4									
5									

RATE NO.	P ₁ psia	P ₂ psia	P ₀ psia	P ₀ THOUSANDS	P ₀ THOUSANDS	FLOWING TEMPERATURE		% SHUT-IN (P ₀ - P ₁) NO (P ₀ - P ₁)
						P ₀ - P ₁ THOUSANDS	Q McM	
1								
2								
3								
4								
5								

INDICATED WELL HEAD OPEN FLOW MIN 0.145 McM 7.0
 The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated herein, and that said report is true and correct. Executed this the _____ day of _____, 19____

Witness (if any) _____ For Company _____
 For Commission _____ Checked By (Rev. 10/94) _____

[illegible]