

15-179-20937-00-00

STATE OF KANSAS - CORPORATION COMMISSION 03 - 01 - 89
 PRODUCTION TEST & GOR REPORT MAR 1 1989

Form C-5 Revised

Conservation Division

TYPE TEST: (Initial) Annual Workover Reclassification TEST DATE: 3-7-89

Company Pickrell Drilling Co. 5123 (Badman) Lease Well No. 9-1

County Sheridan Location SW-SW-SW Section 32 Township 10 Range 30 W Acres

Field Wild Cat Reservoir Parame Pipeline Connection Koch

Completion Date 2-23-89 Type Completion (Describe) Pumping Plug Back T.D. 4541 Packer Set At

Production Method: Crude Type Fluid Production API Gravity of Liquid/Oil 36.2-58°

Flowing Casing Size 4 1/2 Weight 10.5 I.D. 4609 Set At Perforations 4422 - 4430 To

Tubing Size 2 3/8 Weight I.D. 4519 Set At Perforations To

Pretest: Starting Date 3-7-89 Time 10:00 AM Ending Date 3-7-89 Time 2:00 PM Duration Hrs. 4 hrs.

Test: Starting Date Time Ending Date Time Duration Hrs.

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure			Choke Size				
Casing:	Tubing:								
Bbls./In.	Tank	Starting Gauge			Ending Gauge			Net Prod. Bbls.	
1.69	Size Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	250 144696	2	-	40.15	2	8 1/2	54.37	26	85.32
Test:							40.15		
Test:							14.22 X 6 =		85.32

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections				Orifice Meter Range					
Pipe Taps:	Flange Taps:	RECEIVED		Differential:		Static Pressure:			
Measuring Device	Run-Prover-Tester Size	Orifice Size	Meter	In. Water	In. Merc.	Psig or (Pd)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter									
Critical Flow Prover									
Orifice Well Tester									

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia) (Pm)	Extension /hw x Pm	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)

Gas Prod. MCFD Flow Rate (R): Oil Prod. Bbls./Day: 85.32 Gas/Oil Ratio (GOR) = Cubic Ft. per Bbl.

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 therein, and that said report is true and correct. Executed this the _____ day of _____ 1989

For Offset Operator _____ For State _____ For Company _____

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

PRODUCTIVITY TEST
BARREL TEST

OPERATOR _____ LOCATION OF WELL _____
LEASE _____ OF SEC. _____ T _____ R _____
WELL NO. _____ COUNTY _____
FIELD _____ PRODUCING FORMATION _____
Date Taken _____ Date Effective _____
Well Depth _____ Top Prod. Form _____ Perfs _____
Casing: Size _____ Wt. _____ Depth _____ Acid _____
Tubing: Size _____ Depth of Perfs _____ Gravity _____
Pump: Type _____ Bore _____ Purchaser _____
Well Status _____
Pumping, flowing, etc.

TEST DATA

Permanent _____ Field _____ Special _____
Flowing _____ Swabbing _____ Pumping _____

STATUS BEFORE TEST:

PRODUCED _____ HOURS

SHUT IN _____ HOURS

DURATION OF TEST _____ HOURS _____ MINUTES _____ SECONDS

GAUGES: WATER _____ INCHES _____ PERCENTAGE

OIL _____ INCHES _____ PERCENTAGE

GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) _____

WATER PRODUCTION RATE (BARRELS PER DAY) _____

OIL PRODUCTION RATE (BARRELS PER DAY) _____ PRODUCTIVITY

STROKES PER MINUTE _____

LENGTH OF STROKE _____ INCHES

REGULAR PRODUCING SCHEDULE _____ HOURS PER DAY.

COMMENTS _____

WITNESSES:

FOR STATE

FOR OPERATOR

FOR OFFSET