

15-193-20453-00.00

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

MAY 1 1989

Form C-5 Revised

Conservation Division
 TYPE TEST: (Initial) Annual Workover Reclassification TEST DATE:
 Company Petex Inc. Lease Nollette Well No. #1
 County Thomas Location SW-SW-SW Section 6 Township 10 Range 32 Acres
 Field Teran Reservoir Clear Creek Pipeline Connection
 Completion Date Type Completion(Describe) Plug Back T.D. Packer Set At
4660
 Production Method: Type Fluid Production API Gravity of Liquid/Oil
 Flowing Pumping Gas Lift Crude 19.1 @ 60°
 Casing Size Weight I.D. Set At Perforations To
4 1/2 4658 4 026 4032
 Tubing Size Weight I.D. Set At Perforations To
2 3/8 4606

Pretest: Starting Date Time Ending Date Time Duration Hrs.
 Test: Starting Date 5-16-89 Time 10:00 AM Ending Date 5-17-89 Time 10:00 AM Duration Hrs. 24 Hrs.

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure			Choke Size				
Casing:	Tubing:								
Bbls./In.	Tank	Starting Gauge			Ending Gauge		Net Prod. Bbls.		
1.67	Size Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:									
Test:	<u>206 4349</u>	<u>6</u>	<u>7</u>	<u>131.93</u>	<u>7</u>	<u>10 3/4</u>	<u>15819</u>	<u>56</u>	<u>26124</u>
Test:							<u>19193</u>		
							<u>2696</u>		

GAS PRODUCTION OBSERVED DATA

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

RECEIVED
 STATE CORPORATION COMMISSION
 MAY 22 1989

GAS FLOW RATE CALCULATIONS (R)

Coëff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia)(Pm)	Extension $\sqrt{hw \times Pm}$	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)

Gas Prod. MCFD Flow Rate (R): Oil Prod. Bbls./Day: 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 _____ 19

For Offset Operator Gilbert Balthazar For State Randy Lodenburger For Company