

STATE OF KANSAS - CORPORATION COMMISSION
ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

FORM G-2
8-7-58
15-181-20042-0000

TYPE TEST: Deliverability Open Flow TEST DATE: 5-2-83

COMPANY: Centennial LEASE: Pinkney WELL NO.: 1-32

COUNTY: Sherman LOCATION: SW4 32 TWP: 7 RNG: 38 ACRES:

FIELD: Goodland Gas RESERVOIR: Niobrara PIPELINE CONNECTION: Halfbreed

COMPLETION DATE: 8-30-80 PLUG BACK TOTAL DEPTH: 917 PACKER SET AT:

CASING SIZE: 4 1/2 WT.: I.D.: SET AT: PERF.: TO: open hole

TUBING SIZE: WT.: I.D.: SET AT: PERF.: TO:

TYPE COMPLETION (Describe): Single gas TYPE FLUID PRODUCTION:

PRODUCING THRU: Casing RESERVOIR TEMPERATURE F: BAR. PRESS - P_a: 14.4 Psia

GAS GRAVITY - G_g: .592 % CARBON DIOXIDE: % NITROGEN: API GRAVITY OF LIQUID:

VERTICAL DEPTH (H): TYPE METER CONN.: (METER RUN) (METER) SIZE:

SHUT-IN PRESSURE: SHUT IN 4-29 1983 AT (AM)(PM) TAKEN 5-2 1983 AT (AM)(PM)
 FLOW TEST: STARTED 5-2 1983 AT (AM)(PM) TAKEN 5-3 1983 AT (AM)(PM)

OBSERVED DATA DURATION OF SHUT-IN _____ HR.

SHUT-IN OR FLOW	ORIFICE SIZE in.	(METER) (PROVER) PRESSURE psig	DIFF. in. (h _w)(h _d)	FLOWING TEMP. t	WELL-HEAD TEMP. t	CASING WELLHEAD PRESS.		TUBING WELLHEAD PRESS.		DURATION HOURS RECEIVED	LIQUID PROD. Bbls.
						psig	(P _w)(P _i)(P _c) psia	psig	(P _w)(P _i)(P _c) psia		
SHUT-IN						22.7	37.1				
FLOW	1/2	10.0	8.8			10.2	24.6			MAY 16 1983	

RATE OF FLOW CALCULATIONS CONSERVATION DIVISION
Wichita, Kansas

COEFFICIENT (F ₁)(F ₂) Mcfd	(METER) (PROVER) PRESSURE psia	EXTENSION $\sqrt{P_m h_w}$	GRAVITY FACTOR F _g	FLOWING TEMP. FACTOR F _t	DEVIATION FACTOR F _{pv}	RATE OF FLOW R Mcfd	GOR	G _m
1.219	24.4	14.653	1.296	1.000	1.000	2.3		

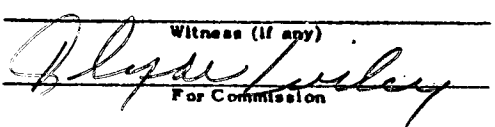
(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

(P_c)² = 1.376, (P_w)² = .605, P_d = _____ % (P_c - 14.4) + 14.4 = _____ (P_w)² = 0.207 (P_d)² = _____

$\frac{(P_c)^2 - (P_w)^2}{(P_c)^2 - (P_d)^2}$	(P _c) ² - (P _w) ²	$\frac{P_c^2 - P_w^2}{P_c^2 - P_w^2}$	LOG []	"n"	"n" x LOG []	ANTILOG	OPEN FLOW DELIVERABILITY EQUALS R x ANTILOG Mcfd
1.169	.771	1.5162	.1808	.718	.1298	1.3483	3.1

OPEN FLOW 3.1 Mcfd @ 14.65 psia DELIVERABILITY Mcfd @ 14.65 psia

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__.

Witness (if any)

 For Commission

For Company

 Checked by