

STATE OF KANSAS - CORPORATION COMMISSION
PRODUCTION TEST & GOR REPORT

15-171-20480-0000

Form C-5 Rev.

Conservation Division

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company Wabash Energy Corporation Lease Strickert Well No. #2

County Scott Location 1000' FNL 550' FEL Section 1 Township 18S Range (E/W) 32 Acres 480

API Well Number 15-171-20480 Reservoir(s) Cherokee Gas Pipeline Connection No

Completion Date 2-08-95 Type of Completion (Describe) Cased Hole & Acidize Plug Back T.D. 4585' Packer Set At None

Lifting Method: None Pumping Gas Lift ESP Oil & Salt Water Type Liquid Oil & Salt Water API Gravity of Liquid/Oil

Casing Size 5 1/2" Weight 14# ID. 5" Set At 4623' Perforations 4539 To 4543

Tubing Size 2 3/8" Weight 4.7# ID. 2" Set At 4560' Perforations To

Print:

Starting Date 9-3-99 Time 8:00 AM/PM AM Ending Date 9-4-99 Time 8:00 AM/PM AM

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure Separator Pressure Choke Size

Casing: Paig Tubing: Paig

Ebls./In.	Stock Tank		Starting Gauge			Ending Gauge			Net API Ebls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest	<u>240</u>	<u>28343</u>	<u>5</u>	<u>2</u>		<u>8</u>	<u>5</u>		<u>100%</u>	<u>36304</u>
Test									<u>4804</u>	
Test										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections (Yes/No) Orifice Meter Range Static Pressure:

Pipe Taps: Flange Taps: Differential:

Type Measuring Device	Entry Size	Orifice Size	Meter-Prover-Tester Pressure					Diff. Press. (h ₁) or (h ₂)	Gas Gravity (G _g)	Flowing Temp. (t)
			In. Water	In. Merc.	Paig or (P _g)	%CO ₂	H ₂ Sppm			
Orifice Meter										
Critical Flow Prover										
MERLA Well Tester										

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (F ₁) (F ₂)	Meter-Prover Press. (Paia)(P _a)	Press. Extension $\sqrt{h_1 \cdot P_a}$	Gravity Factor (F _g)	Flowing Temp. Factor (F _t)	Deviation Factor (F _d)	Sqr. Rt. Chart Factor (F _c)

Gas Prod. MCFD Flow Rate (R): 36 Oil Prod. Bbls./Day: 36 Gas/Oil Ratio (GOR) = 1 Cubic Feet 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 4th day of Sept 19-99

Kevin D. Smith RECEIVED 9-21-99
For Offset Operator For Commission For Company (Rev. 10/96)