

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

PRODUCTIVITY TEST  
BARREL TEST

15-171-20541-0000

OPERATOR Abercrombie Energy LLC LOCATION OF WELL NW NE NW  
 LEASE Schowalter OF SEC. 12 T 18 R 32 W  
 WELL NO. 2-12 COUNTY SCOTT  
 FIELD \_\_\_\_\_ PRODUCING FORMATION Johnson  
 Date Taken \_\_\_\_\_ Date Effective \_\_\_\_\_  
 Well Depth 4648 Top Prod. Form 4535 Perfs 4559-63  
 Casing: Size 5 1/2 Wt. 14# Depth 4646 Acid 1500 gal  
 Tubing: Size 2 3/8 Depth of Perfs 4575-78 Gravity \_\_\_\_\_  
 Pump: Type Insert Bore 1 1/2" Purchaser EOI  
 Well Status Pumping  
 Pumping, flowing, etc.

TEST DATA

Permanent \_\_\_\_\_ Field \_\_\_\_\_ Special \_\_\_\_\_  
 Flowing \_\_\_\_\_ Swabbing \_\_\_\_\_ Pumping X

STATUS BEFORE TEST:

PRODUCED 24 HOURS  
 SHUT IN \_\_\_\_\_ HOURS  
 DURATION OF TEST \_\_\_\_\_ HOURS 26 MINUTES 45 SECONDS  
 GAUGES: WATER \_\_\_\_\_ INCHES \_\_\_\_\_ PERCENTAGE  
 OIL \_\_\_\_\_ INCHES \_\_\_\_\_ PERCENTAGE  
 GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) 53.83  
 WATER PRODUCTION RATE (BARRELS PER DAY) \_\_\_\_\_  
 OIL PRODUCTION RATE (BARRELS PER DAY) 53.83 PRODUCTIVITY  
 STROKES PER MINUTE 7 1/2  
 LENGTH OF STROKE 44 INCHES  
 REGULAR PRODUCING SCHEDULE 24 HOURS PER DAY.

COMMENTS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

WITNESSES:

[Signature] FOR STATE  
[Signature] FOR OPERATOR  
 \_\_\_\_\_ FOR OFFSET

[Handwritten mark]

RECEIVED  
STATE CORPORATION COMMISSION

APR 12 2000  
4-12-00  
STATE CORPORATION COMMISSION

**STATE OF KANSAS - CORPORATION COMMISSION  
PRODUCTION TEST & GOR REPORT**

Conservation Division

Form C-5 Revised

TYPE TEST: Initial    Annual    Workover    Reclassification    TEST DATE: \_\_\_\_\_

Company \_\_\_\_\_ Lease \_\_\_\_\_ Well No. \_\_\_\_\_

County \_\_\_\_\_ Location \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Acres \_\_\_\_\_

Field \_\_\_\_\_ Reservoir \_\_\_\_\_ Pipeline Connection \_\_\_\_\_

Completion Date \_\_\_\_\_ Type Completion(Describe) \_\_\_\_\_ Plug Back T.D. \_\_\_\_\_ Packer Set At \_\_\_\_\_

Production Method: \_\_\_\_\_ Type Fluid Production \_\_\_\_\_ API Gravity of Liquid/Oil \_\_\_\_\_

Flowing \_\_\_\_\_ Pumping \_\_\_\_\_ Gas Lift \_\_\_\_\_  
Casing Size \_\_\_\_\_ Weight \_\_\_\_\_ I.D. \_\_\_\_\_ Set At \_\_\_\_\_ Perforations \_\_\_\_\_ To \_\_\_\_\_

Tubing Size \_\_\_\_\_ Weight \_\_\_\_\_ I.D. \_\_\_\_\_ Set At \_\_\_\_\_ Perforations \_\_\_\_\_ To \_\_\_\_\_

Pretest: \_\_\_\_\_ Duration Hrs. \_\_\_\_\_

Starting Date \_\_\_\_\_ Time \_\_\_\_\_ Ending Date \_\_\_\_\_ Time \_\_\_\_\_

Test: \_\_\_\_\_ Duration Hrs. \_\_\_\_\_

Starting Date \_\_\_\_\_ Time \_\_\_\_\_ Ending Date \_\_\_\_\_ Time \_\_\_\_\_

**OIL PRODUCTION OBSERVED DATA**

Producing Wellhead Pressure \_\_\_\_\_ Separator Pressure \_\_\_\_\_ Choke Size \_\_\_\_\_

Bbbs./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbbs.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:										
Test:										

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

Gas Prod. MCFD \_\_\_\_\_ Oil Prod. \_\_\_\_\_ Gas/Oil Ratio \_\_\_\_\_ Cubic Ft. \_\_\_\_\_  
Flow Rate (R): \_\_\_\_\_ Bbbs./Day: \_\_\_\_\_ (GOR) = \_\_\_\_\_ 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

For State

For Company