

15-171-20339-00-00 ✓

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Form C-5 Revised

Conservation Division

TYPE TEST: (Initial) Annual Workover Reclassification TEST DATE: 9-22-86 Well No. 1
 Company: Donald C Slawson oil Janssen Lease 9-23-86
 County: Scott Location: SE-SE-NE Section: 35 Township: 17S Range: 31W Acres: 1
 Field: Manning North West Reservoir: KC Pipeline Connection: Inland crude
 Completion Date: 9-4-86 Type Completion (Describe): Cased Hole & Perforated Plug Back T.D.: 4544 Packer Set At: none
 Production Method: Pumping Type Fluid Production: Oil API Gravity of Liquid/Oil: 36
 Flowing Casing Size: 4 1/2" Weight: 10.5 I.D.: 4 Set At: 4506 Perforations: 4248 To: 4250
 Tubing Size: 2 3/8" Weight: 4.7 I.D.: 2" Set At: 4257 Perforations: 4258 To: 4260
 Pretest: Starting Date: Time: Ending Date: Time: Duration 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.	
	Size Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	2021	1	1	50	7	4	125.01		125.01
Test:	2020	6	4	40	8	1-1/2	35.86	20 Bbls	35.86
Test:								total - 160.87	

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. 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)(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: 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__

Paul A. Luthi For State *Robert L. Lutter* For Company

For Offset Operator

SEP 25 1986