

15-101-21677-00-00  
10-1146 NK

STATE OF KANSAS - CORPORATION COMMISSION  
PRODUCTION TEST & GOR REPORT

Form C-5 Revised

Conservation Division  
 TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 1-11-95  
 Company: Ritchie Lease: S. Shapland Well No.: 1  
 County: Lane Location: SESESE Section: 36 Township: 18 Range: 28 Acres:  
 Field: LKC Reservoir: LKC Pipeline Connection: T-2460  
 Completion Date: 8-19-94 Type Completion(Describe): Acid Plug Back T.D.: 4625 Packer Set At:  
 Production Method: Pumping Type Fluid Production: Oil API Gravity of Liquid/Oil: 37  
 Flowing Casing Size: 5 1/2" Weight: 4.7 I.D.: 4.658 Set At: 4324 Perforations: 29 To: 25  
 Tubing Size: 2 3/8" Weight: 4.7 I.D.: 4.610 Set At: 4610 Perforations: 29 To: 25  
 Pretest: Starting Date: \_\_\_\_\_ Time: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Time: \_\_\_\_\_ Duration Hrs.: \_\_\_\_\_  
 Test: Starting Date: 1-11-95 Time: 11:00 Ending Date: 1-12-95 Time: 11:00 Duration Hrs.: 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size	
Casing:			Tubing:				
Bbls./In.	Tank	Starting Gauge	Ending Gauge		Net Prod. Bbls.		
1607	Size Number	Feet Inches Barrels	Feet Inches Barrels	Water	Oil		
Pretest:							
Test:	200	28223 1 0	20.04 2 7	51.77	24	31.73	
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-Tester Pressure In. Water	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)	Extension (Pm)	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)

Gas Prod. MCFD: \_\_\_\_\_ Oil Prod. Bbls./Day: 31.73 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 12th day of Jan 1995

For Offset Operator: \_\_\_\_\_ For State: \_\_\_\_\_ For Company: \_\_\_\_\_