

STATE OF KANSAS - CORPORATION COMMISSION  
 PRODUCTION TEST & GOR REPORT

15-077-2179-0000

Conservation Division

Form C-5 Revised

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company: Bison Energy Corporation Lease: Yoder "A" Well No.: 1

County: Harper Location: E/2 NE NW Section: 11 Township: 31-S Range: 8-W Acres: 40

Field: Spivey-Grabs Reservoir: Mississippi Pipeline Connection: Oxy

Completion Date: 9-88 Type Completion(Describe): Frac Plug Back T.D. Packer Set At

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

Flowing Pumping X Gas Lift Oil

Casing Size 5 1/2" Weight 14.5# I.D. Set At 4458' Perforations 4430'-4434' To

Tubing Size 2 7/8" Weight I.D. Set At 4250' Perforations To

Pretest: Starting Date 7-6-92 Time 7:00am Ending Date 7-6-92 Time 7:00 am Duration Hrs. 24

Test: Starting Date 7-6-92 Time 7:00am Ending Date 7-6-92 Time 7:00 am Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size				
Casing:			Tubing:							
Bbbs./In.	Tank	Starting Gauge			Ending Gauge			Net Prod. Bbbs.		
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:	200		9	8		10	1			5.80
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections			Orifice Meter Range					
Pipe Taps:	Flange Taps:	Orifice	Meter-Prover-Tester Pressure		Differential:	Static Pressure:		
Measuring Device	Run-Prover-Tester Size	Size	In.Water	In.Merc.	Psig or (Pd)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter		.500			21	2.5		
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)
1.214		7.245			1.19	

Gas Prod. MCFD 10 Oil Prod. Bbbs./Day: 5.80 Gas/Oil Ratio (GOR) = 1724 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\_\_

For Offset Operator For State For Company