

15-077-20396-0000

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Conservation Division				Form C-5 Revised			
TYPE TEST:		Initial	Annual	Workover	Reclassification		TEST DATE:
Company: GRAVES DRILLING CO., INC.				Lease: MARONEY		Well No.: #1	
County: Harper		Location: C SE NE		Section: 4-32S-9W		Range: Acres 120	
Field: Spivey Grab (NON PROF)		Reservoir: Mississippian		Pipeline Connection: TRIDENT/NCRA			
Completion Date: 1-19-77		Type Completion (Describe): Single		Plug Back T.D.		Packer Set At	
Production Method: Pumping: XGas Lift:		Type Fluid Production: Oil & Water		API Gravity		of Liquid/Oil 25.4	
Casing Size: 5 1/2		Weight: 15 1/2		I.D. Set At 4360'		Perforations: 4369' to 4372'	
Tubing Size: 2 3/8"		Weight		I.D. Set At		Perforations To	

Pretest:						Duration hrs.	
Starting Date: 5/4/96		Time: 8:00 a		Ending Date: 5/5/96		Time: 8:00 a	
						24	
Test:						Duration hrs.	
Starting Date: 5/5/96		Time: 8:00 a		Ending Date: 5/6/96		Time: 8:00 a	
						24	

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure				Separator Pressure				Choke Size			
Casing:		Tubing:		Starting		Gauge		Ending		NET	
Bbls./In.	TANK size	TANK number	Feet	In.	Barrels	Feet	In.	Barrels	Water	Oil	
Pretest:	200	47107	6	3	125.25	6	4	126.92	30	1.67	
Test:	200	47107	6	4	126.92	6	5	128.59	30	1.67	
Test:											

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections				Orifice Meter Range				Static Pressure:	
Pipe Taps:		Flange Taps:		Differential:		Diff. Press. Gravity		Flowing Temp. (t)	
Measuring Device	Run-Prover-Tester size	Orifice Size	Meter-Prover-Tester In. Water	Pressure In. Merc.	Psig or (Pd)	(Pd) Gas (Gg)	Flowing Temp. (t)		
Orifice Meter		1/2"						0.667	
Critical Flow Prover									
Orifice Well Tester									

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia)	Extension ' hwx Pm	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fp)	Chart Factor (Fd)
Gas Prod. MCFD	Oil Prod.	Gas/Oil Ratio (GOR) -	Cubic Ft. per Bbl.			
Flow Rate (R):	14 Bbls./Day:	1.67	8,383			

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 28th day of June, 1996

For OffseOperator For State *[Signature]* Kansas Graves Drilling Co., Inc. For Company *[Signature]* Form C-5 (5/88)

RECEIVED CORPORATION COMMISSION
 JUL 22 1996
 7-22-96
 CONSERVATION DIVISION
 WICHITA, KS