

STATE OF KANSAS - CORPORATION COMMISSION **15-077-26394-0000**  
 PRODUCTION TEST & GOR REPORT

Conservation Division

Form C-5 Revised

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company: GRAVES DRILLING CO., INC. Lease: Simpson #1 Well No.:

County: Harper Location: E 1/2 NE SW Section: #1 Township: 4-32S-9W Range: Acres: 60

Field: Spivey-Grabs (Non Prorated) Reservoir: Mississippian Pipeline Connection: TRIDENT/NCRA

Completion Date: 12-27-76 Type Completion (Describe): Single Plug Back T.D. Packer Set At:

Production Method: Flowing Pumping x Gas Lift Type Fluid Production: Oil & Water API Gravity of Liquid/Oil: 27.1

Casing Size: 5 1/2 Weight: 15 1/2 I.D. Set At Perforations To: 4327' - 4342'

Tubing Size: 2 1/2 Weight: I.D. Set At Perforations To:

Pretest: Starting Date 5-01-94 Time 8:00 a Ending Date 5-02-94 Time 8:00 a Duration Hrs. 24

Test: Starting Date 5-02-94 Time 8:00 a Ending Date 5-03-94 Time 8:00 a Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size				
Casing:	Tubing:									
Bbls./In.	Tank Size	Number	Starting Gauge			Ending Gauge			Net Prod. Bbls.	
			Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	200	47516	3	11	78.48	3	11 3/4	79.73	80	1.25
Test:	200	47516	3	11 3/4	79.73	4	1/2	80.98	80	1.25
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		Diff. Press.	Gravity	Flowing	
			In.Water	In.Merc.	Psig or (Pd)	(hw) or (hd)	Gas (Gg)	Temp. (t)
Orifice Meter		3/4"					.666	
Critical Flow Prover								
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

Coeff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Pm)	Extension /hw x Pm	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
Gas Prod. MCFD Flow Rate (R):	70	Oil Prod. Bbls./Day: 1.25	Gas/Oil Ratio (GOR) =	56,000	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. Witness this the 3rd day of May 19 94

KANSAS CORPORATION COMMISSION Kansas Graves Drilling Co., Inc.

For Offset Operator For State For Company

JUN 07 1994  
 6-7-94  
 CONSERVATION DIVISION  
 WICHITA, KS

Form C-5 (5/88)