

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-135-23826-00-90
 7123 Form C-5 Revised

Conservation Division

TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 8-25-94

Company PCKPCN Lease Babcock "G" Well No. 3

County Ness Location NW SE SE Section 25 Township 16 Range 26 Acres 40

Field NA Reservoir MISSISSIPPI Pipeline Connection KACH

Completion Date 8-9-94 Type Completion (Describe) Single Oil Plug Back T.D. Open Hole Packer Set At

Production Method: Pumping Gas Lift Type Fluid Production Oil API Gravity of Liquid/Oil 36.7

Flowing Pumping Gas Lift Casing Size 5 1/2 Weight 15.5 I.D. 4.489 Set At Open Hole Perforations To

Tubing Size 2 3/8 Weight 4.7 I.D. 4.495 Set At Perforations To

Pretest: Starting Date Time Ending Date Time Duration Hrs.

Test: Starting Date 8-25-94 Time 1:00 Ending Date 8-26-94 Time 1:00 Duration Hrs. 29

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size	
Casing:			Tubing:				
Bbls./In.	Tank	Starting Gauge	Ending Gauge		Net Prod. Bbls.		
1/4"	Size Number	Feet Inches Barrels	Feet Inches Barrels	Water	Oil		
Pretest:							
Test:	<u>200</u>	<u>24003</u>	<u>1' 0"</u>	<u>20.04</u>	<u>2</u>	<u>1 1/4" 42.16</u>	
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	Grav. Factor (Fg)	Flowing Temp. (t)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)
Orifice Meter							
Critical Flow Prover							
Orifice Well Tester							

GAS FLOW RATE CALCULATIONS (R)

Coeff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Pm)	Extension $\sqrt{hw \times Pm}$	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fdx)	Chart Factor (Fd)

Gas Prod. MCFD Flow Rate (R): Oil Prod. Bbls./Day: 22.13 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 26th day of Aug 1994

For Offset Operator _____ For State _____ For Company _____

RECEIVED
 STATE CORPORATION COMMISSION

AUG 26 1994

CONSERVATION DIVISION

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

PRODUCTIVITY TEST
BARREL TEST

OPERATOR _____ LOCATION OF WELL _____
 LEASE _____ OF SEC. _____ T _____ R _____
 WELL NO. _____ COUNTY _____
 FIELD _____ PRODUCING FORMATION _____
 Date Taken _____ Date Effective _____
 Well Depth _____ Top Prod. Form _____ Perfs _____
 Casing: Size _____ Wt. _____ Depth _____ Acid _____
 Tubing: Size _____ Depth of Perfs _____ Gravity _____
 Pump: Type _____ Bore _____ Purchaser _____
 Well Status _____
 Pumping, flowing, etc.

TEST DATA

Permanent _____ Field _____ Special _____
 Flowing _____ Swabbing _____ Pumping _____

STATUS BEFORE TEST:

PRODUCED _____ HOURS
 SHUT IN _____ HOURS
 DURATION OF TEST _____ HOURS _____ MINUTES _____ SECONDS
 GAUGES: WATER _____ INCHES _____ PERCENTAGE
 OIL _____ INCHES _____ PERCENTAGE
 GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) _____
 WATER PRODUCTION RATE (BARRELS PER DAY) _____
 OIL PRODUCTION RATE (BARRELS PER DAY) _____ PRODUCTIVITY
 STROKES PER MINUTE _____
 LENGTH OF STROKE _____ INCHES
 REGULAR PRODUCING SCHEDULE _____ HOURS PER DAY.
 COMMENTS _____

WITNESSES:

FOR STATE _____ FOR OPERATOR _____ FOR OFFSET _____