STATE OF KANSAS - CORPORATION COMMISSION PRODUCTION TEST & GOR REPORT

Company Men Can Warvov Leastion Location Township Range (EW) Acres Acres Prival Number Reservoit(s) 5 - 0 3 3 - 21, 226 Completion Date Type of Completion (Describe) Type Liquid Cone Reservoit(s) Flug Back T.D. Packer Sct. At AFI Gravity of Liquid/Oil AFI Gravity	Conservation		<u> </u>	 								Form C-5 Rev.	
County C	TYPE TEST:	2 Init	al	O Annuai	D,	Workover			on TES	TDATE: 6-			
Control Cont	Company		Mleren	av		LCAS	ا مرا عور			Well No.			
El Well Number Fing Back T.D. Fing Back T.D. Factor Sct. A Fing Back T.D. Fing Back T.D. Factor Sct. A Fing Back T.D. Fing Back T.D. Factor Sct. A Fing Back T.D. Fing Back T.D. Factor Sct. A Fing Back T.D. Fi	County -			Location		Section	<i>9771 :</i>	Town	nship	Range (E(V)	Acre		
5- 0.73 - 2-1, 2-26 completion Date Type of Completion (Describe) Fing Back T.D. Proceding Method Completion Type Gas Lift ESP Type Liquid Serial Ferforations API Gravity of Liquid Critical Sarian Since Sing Since Yeight 1D. Set At Ferforations To Cool 5-0-2 5 Time AMPM Ending Date Time AMPM Ending	Commanche										 -		
Type of Compeletion (Describe) Fig. 1	API Well Num	iber	3/2	, ,	Reservoir(s)			,			Gas Pipe	line Connection	
API Gravity of Liquid Colone Fruming Method Gas Lift ESP Type Liquid For As API Gravity of Liquid Colone Fruming Cas Lift ESP Veight ID Set At Perforations Solve Weight ID Set At Perforations To Colo 5-0-2-5 Yelly 15-5 The Set At Perforations To Colone	Completion D	<u>8 – 2 1, 2</u> stc	Type of	Completion	ing (Describs)				Pine	Rack T.D.	+TD Peaker Set A		
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using Size Weight I.D. Set At Ferforations To Color 2 3/9" 41.7 Interest AMPM Ending Date Time AMPM The Time AMPM The Time AMPM The Time AMPM The Time The Time Time The		Pumping							rations				
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Type Measuring Size Size Size In. Water In. Mcrc. Paig or (P.) %CO1 E.Sppm (h.) or (h.) Gravity Temp. (t) Orifice Meter Orifice Or	Orifi∝ Meter (Connections	(Ycs/No)						<u></u>				
Measuring Device In. Water In. Merc. Psig or (P.) %CO. E-Sppm (h.) or (h.) Gravity (G.) Temp. (t) Orifice Meter Meter Critical Flow Prover MERIA Well Tester GAS FLOW RATE CALCULATIONS (R) Coeff. MCFD (F.) Fress. (Psia)(P.) Extension (F.) (F.) Factor (F.) Factor (F.) 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 a facts stated therein, and that said report is true and correct. Executed this 26 FM day of 1992 For Offset Operator For Company For Company For Company For Company	Pipe Taps:		Flange I	aps:		Diffen	ential:			Static Press	ıre;		
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