

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-033-20882-0000

Form C-5 Revised

Conservation Division

TYPE TEST: (Initial) Annual Workover Reclassification TEST DATE: 6-14-94

Company Enron Oil & Gas Company Lease Huck Well No. 26 #1

County Comanche Location 330' FNL & 1250' FWL Section 26 Township 34S Range 16W Acres

Field Reservoir Mississippi Pipeline Connection None

Completion Date 3-24-94 Type Completion(Describe) Single (Oil) Plug Back T.D. 5268 Packer Set At None

Production Method: Type Fluid Production Crude Oil API Gravity of Liquid/Oil 28

Flowing (Pumping) Gas Lift Casing Size 4 1/2 Weight 11.6 I.D. 4.000 Set At 5300 Perforations 5054 To 5068

Tubing Size 2 3/8 Weight 4.7 I.D. 1.995 Set At 5186 Perforations To

Pretest: Starting Date 6-11-94 Time 9:00 AM Ending Date 6-13-94 Time 9:00 AM Duration Hrs. 72

Test: Starting Date 6-13-94 Time 9:00 AM Ending Date 6-14-94 Time 9:00 AM Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure			Choke Size					
Casing:	Tubing:									
Bbls./In.	Tank	Starting Gauge			Ending Gauge			Net Prod. Bbls.		
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	210	0001	2	2	30.42	2	9 1/4	38.9	112.0	8.5
Test:			2	9 1/4	38.9	3	3	45.63	61.84	6.7
Test:	210	0001	3	3	45.63	4	3 3/4	60.54	123.0	14.9

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 In. Water	Tester Pressure In. Merc.	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter							
Critical Flow Prover			No Venting of Gas				
Orifice Well Tester							

GAS FLOW RATE CALCULATIONS (R)

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

Gas Prod. MCFD Flow Rate (R): 0 Oil Prod. Bbls./Day: 14.9 Gas/Oil Ratio (GOR) = N/A 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 14th day of June 1994

[Signature]

For Offset Operator

For State

RECEIVED
 STATE CORPORATION COMMISSION
 JUN 21 1994
 6-21-94
 CONSERVATION DIVISION
 Wichita, KS