

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-129-21108-0000 N
 Form C-5 Revised

Conservation Division

TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 10-5-95

Company Anadarko Petroleum Corp. USA Lease Well No. AA-1

County MORTON Location 660FWL+1650FNL 11 Township 33 Range 40 Acres.

Field Stirrup Reservoir U. Morrow Pipeline Connection Anadarko Gathering Co.

Completion Date 10-1-92 Type Completion(Describe) Single Oil Plug Back T.D. 5474 Wacker Set At NA

Production Method: Type Fluid Production Oil API Gravity of Liquid/Oil 40.3 @ 60°

Flowing Pumping Gas Lift Casing Size 5.50 Weight 15.5 I.D. 4.950 Set At 5514 Perforations 5354 To 5380

Tubing Size 2.375 Weight 4.7 I.D. 1.995 Set At 5390 Perforations To

Pretest: Starting Date Time Ending Date Time Duration Hrs.

Test: Starting Date 10/4/94 Time 10:15 Ending Date 10/5/94 Time 10:15Am Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure Separator Pressure Choke Size
 Casing: 240 Tubing: 80 36#

Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:	300		7	1/4	139.38	12	10"	255.48	-	116.1
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections Orifice Meter Range
 Pipe Taps: Flange Taps: Differential: 100 Static Pressure: 250

Measuring Device	Run-Prover-Tester Size	Orifice Size	Meter-Prover-Tester Pressure		Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)	
			In. Water	In. Merc.				
Orifice Meter	2	1.25			41.6	10"	755	60°
Critical Flow Prover								
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia)(Pm)	Extension Vhw x Pm	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
8,329	56.0	23.664	1.151	1.000	1.000	

Gas Prod. MCFD 226 Oil Prod. Bbls./Day: 116.1 Gas/Oil Ratio (GOR) = 1.946 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 5th day of Oct, 19 94

For Offset Operator Albert J. Kembo For State For Company

RWD 10-05-94

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

1-10-20