

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-175-10080-8880 Form C-5 Revised

Conservation Division

TYPE TEST: Initial (Annual) Workover Reclassification TEST DATE: 1-11-91

Company Lease Well No.

A.L. Obercrombie, Inc. Simmons

County Location Section Township Range Acres

Seward 26 33 31

Field Reservoir Pipeline Connection

Kismet Mississippian

Completion Date Type Completion (Describe) Plug Back T.D. Packer Set At

11-21-66 Single-Oil 5894' 5820

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

Flowing (Pumping) Gas Lift Oil + Water 38°

Casing Size Weight I.D. Set At Perforations To

5 1/2" 140 # 5.012" 5920' 5836' - 5863'

Tubing Size Weight I.D. Set At Perforations To

2 3/8" 4.7 # 1.995" 5829' 4456' - 4461'

Pretest: Starting Date 1-9-91 Time 11:00AM Ending Date 1-10-91 Time 11:00AM Duration Hrs. 24

Test: Starting Date 1-10-91 Time 11:00AM Ending Date 1-11-91 Time 11:00AM Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure Separator Pressure Choke Size

Casing: 1 1/2" Tubing: 15 12

Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
1.4										
Pretest:	250	589	0	8	11.2	2	11.86	50.2	75	39
Test:	250	589	2	11.86	50.2	5	3	88.2	100	38
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	In. Merc.	Psig or (Pd)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter								
Critical Flow Prover								
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

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

Gas Prod. MCFD Flow Rate (R): TSTM Oil Prod. Bbls./Day: 38 Gas/Oil Ratio (GOR) = 1000 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 11th day of January, 1991

For Offset Operator

For State

For Company

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 _____