

STATE OF KANSAS - CORPORATION COMMISSION  
 PRODUCTION TEST & GOR REPORT

Form C-5 Revised

Conservation Division

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company Giffey Service Oil & Gas Corp Lease Hitch Q Well No. 2

County Seward Location 990 FSL 1980 FEL Section 28 Township 32S Range 34W Acres 80

Field Chester Reservoir Chester Pipeline Connection PE

Completion Date 12-29-85 Type Completion (Describe) SINGLE PERFS Plug Back T.D. 6258 Packer Set At

Production Method: (Pumping) Type Fluid Production Oil & trace water API Gravity of Liquid/Oil 40.1 @ 60'

Casing Size 5 1/2 Weight 14 # I.D. 6299' Set At 6147 - 6149' Perforations To

Tubing Size 2 3/8" Weight 4.7 # I.D. 6166' Set At Perforations To

Pretest: Starting Date 1-24-86 Time 2:30 PM Ending Date 1-30-86 Time 2:30 P Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure Separator Pressure Choke Size

Casing: 3.5 Tubing:

Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:	<u>300</u>	<u>1508.5</u>	<u>7</u>	<u>3</u>	<u>145.29</u>	<u>12</u>	<u>6</u>	<u>250.50</u>	<u>0</u>	<u>105.</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			Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
			In. Water	In. Merc.	Psig or (Pd)			
Orifice Meter								
Critical Flow Prover	<u>2"</u>	<u>1/4"</u>			<u>14 Psig</u>		<u>761</u>	
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia)	Extension (Pm)	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Factor (Fp)

Gas Prod. MCFD Flow Rate (R): 37.6 Oil Prod. Bbls./Day: 105 Gas/Oil Ratio (GOR) = 358.00 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 30th day of January 1986

For Offset Operator [Signature] For State [Signature] For Company [Signature]

RECEIVED  
 STATE CORPORATION COMMISSION  
 4 1986  
 CONSERVATION DIVISION