

#11 Evan

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-055-21026-0000

Conservation Division Form C-6 (Rev. 10/90)

TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 8/30/02

Company: Beverco Lease: Rome Well No.: 1

County: Finney Location: SE 1/4 Section: 34 Township: 22S Range (E/W): 34 W Acres: 40

API Well Number: 15-Terry Reservoir(s): LHC Gas Pipeline Connection: Eott

Completion Date: 11-15-92 Type of Completion (Describe): Singular Plug Back T.D.: 4680 Packer Set At: NA

Lifting Method: Pumping Gas Lift: None ESP: None Type Liquid: oil API Gravity of Liquid: 40.26

Casing Size	Weight	LD.	Set At	Perforations	To
<u>5.5</u>	<u>6.5</u>	<u>4850</u>	<u>4078</u>	<u>3888</u>	<u>4026</u>
Tubing Size	Weight	LD.	Set At	Perforations	To
<u>2 7/8</u>	<u>6.5</u>	<u>2441</u>	<u>4005</u>	<u>4084</u>	<u>4085</u>

Test Starting Date: 8/29/02 Time: 3:00 AM/PM: AM/PM Ending Date: 8/30/02 Time: 3:00 AM/PM: AM/PM

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure		Choke Size						
Casing: <u>Paig</u>	Tubing: <u>Paig</u>	<u>Paig</u>	<u>Paig</u>							
Bbls./In.	Stock Tank	Starting Gauge		Ending Gauge		Net API Bbls.				
	Size Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil	
Pretest:										
Test:	<u>300</u>	<u>146276</u>	<u>12 1/2</u>	<u>8 1/2</u>	<u>54.27</u>	<u>5</u>	<u>8 1/2</u>	<u>114.39</u>	<u>40.08</u>	<u>60.12</u>
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections (Yes/No)		Orifice Meter Range		Static Pressure:					
Pipe Taps:	Flange Taps:	Differential:							
Type Measuring Device	Entry Size	Orifice Size	Meter-Prover-Tester Pressure				Diff. Press. (h _w) or (h _t)	Gas Gravity (G _p)	Flowing Temp. (t)
			In. Water	In. Merc.	Paig or (P _d)	%CO ₂	H ₂ S ppm		
Orifice Meter									
Critical Flow Prover									
MERLA Well Tester									

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (F ₁) (F ₂)	Meter-Prover Press. (P _{1a}) (P _{1b})	Press. Extension $\sqrt{h_w \cdot P_{1a}}$	Gravity Factor (F _g)	Flowing Temp. Factor (F _t)	Deviation Factor (F _z)	Sqr. Rt. Chart Factor (F _{ch})

Gas Prod. MCFD Flow Rate (R): _____ Oil Prod. Bbls./Day: 60.12 Gas/Oil Ratio (GOR) = _____ Cubic Feet 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 29 day of 8 2002

For Orifice Operator: [Signature] For Commission: [Signature] For Company: [Signature]

RECEIVED
 JAN 06 2003
 KCC WICHITA
 1-6-03