STATE OF KANSAS - CORPORATION COMMISSION
PRODUCTION TEST & GOR REPORT JUN 1 1988

| Conservat | tion D | ivision_ | | NODOO 1 TO | ine I res | er die skape in de | na najvenna svenska s | - Charlest Charles | 07554000000 | | Form C | -5 Revised |
|--|--|--------------------------------------|--|-------------|------------------------|------------------------------|----------------------------------|--|----------------|----------------------------------|-------------------------------------|---------------|
| TYPE TEST | | | innual | Workove | ALL MARKS AND ADDRESS. | | ssifics | ation | 1 | EST DATE: | Control of the second second second | |
| Company | | | | Lease | | | | | | Well | No. | |
| 14 | no | 011 8 | <u>Gas</u> | | | <u>20185</u> | <u> </u> | - 707 | | | | - |
| County | | • | | cation | _ | | ction | | nship | _ | | _ |
| <u>Stev</u> | <u> </u> | · | | NW-NE | <u> </u> | | 25 | | 32 5 | | | 30 |
| Field | ſ | . ` | Ke | servoir | | | Pip | | Connecti | .on | | |
| harabee Chester No Completion Date Type Completion (Describe) Plug Back T.D. Packer Set At | | | | | | | | | | | | |
| Completion | | | Type C | | nesc | rride) | | | . | | Pack | er Set At |
| 9-19-84 Production Method: Type Fluid Production API Gravity of Liquid/011 | | | | | | | | | | | | |
| 11044012011 110411111 | | | | | | | | | | | | |
| Flowing Casing Si | Pum | ping Ga | as Lift | | <u> </u> | Set A | t | Per | ora | ions | To | |
| Cashie of | | | 5 | | | 632 | | | | | | 6 6101 |
| Tubing Si | ze | Woigh | | I.D. | | Set A | | Per | fora | ions | To | 0707 |
| 27/ | 17 | // | 4 | | | 613 | 57 | | | | | |
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| Starting | Date / | 6-1-88 | Time / | 0915 | Er | nding i | Date & | 5-2- | ЯX | Time 07 | 00 5 | 3.75 |
| Test: | | / 20 | 7) | | | | | <u> </u> | OA. | | Dur | ation Hrs. |
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| And Anna Bill State to a Service of Cares | ngar as reast, was the | | | OIL PRODUC | | | | | | | | |
| Producing | well | head Press | | • | Se | parat | or Pres | ssure | | | Choke | Size |
| Casing: | 50 | 7 Tubir | 1g: 5 C |) | | | | | | | | |
| Bbls./In. | <u>. </u> | Tank | S | tarting Ga | uge | | | Inding | Gaug | ζΘ | Net Pro | d. Bbls. |
| | Siz | e Number | Feet | Inches | Bar | rels | Feet | Inc | 108 | Barrels | Water | 011 |
| | ام وا | 1/1/20 | 1 11 | 113/1 | 24 | 1001 | 12 | 17 | | 2001 | 1 2 | 12 |
| Pretest: | 300 | 00121 | 11 | 174 | 07 | v,v | 15 | <u> </u> | <u> </u> | 253.0 | | 1/ |
| ļ | 300 | 1100 | 1/2 | 74 | 25 | 3,01 | 12 | 1 7 | , | 265,33 | 13 | 1252 |
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| Test: | \ . | | | | | | |] | | • | | |
| 1030. |) Complete working | | es Ave do: * has labour 29-ic | GAS PRODUC | יידרטאי | OBSE | מת משעם | ነ ጥል | 217 117 22 117 | angeli a 100 de de de despue par | | |
| Orifice M | leter (| Connection | | | | | ice Met | | nge | | | |
| Pipe Taps | | Flange | | | | | erentia | | | Static | Pressure: | · |
| Measuring | | | | Meter-Pro | ver- | Tester | r Press | ide. | Diff | . Press | | Flowing |
| Device | | ster Size | | In.Water | In M | lerc. I | Psig or | (Pa) | (hw) | _or_ (hd) | Gas. (Gg) | Temp. (t) |
| Orifice | | | | Ţ | | | | <u> </u> | | 011112 00111 3 | - 4 | _ |
| Meter | | | | <u> </u> | | | | | | | <u> </u> | 88 |
| Critical | | | | | Ì | | | | | JUN | 21 1989 | |
| Flow Prov | rer | | | | | | | | | <u>}</u> | <u> </u> | a |
| Orifice Well Test | an | | } | 1 | | | | ٠. | | CONSE. | ATION DIVISION | r · ′ |
| HCIT 1626 | ,61 | Salking i and a Same principal and a |) | GAS FLOW R | ን ስ ጥርር የ | CATCIII | A TOTAL | (R) | A | | ita, Kansas | |
| Coeff. MC | חבי | Meter-Pro | WAS ARREST ON THE WAY AND A STATE OF THE PARTY OF THE PAR | Extension | THE PROPERTY. | designation of the party | the second strips are the second | A CONTRACTOR OF THE PARTY OF TH | - M | Dord - | ± | 01 - |
| | | Press.(Pa | | hw x Pm | | Gravit | r (Fg) | Flowin | | × - 1 | | Chart |
| K. 277. 577 | 0.107 | 1110001(12 | 14 / V m | Y 114 X 111 | | 1 ac cor | 71.87 | Factor | · (F | / Facto | r (Fpv) | Factor(Fd) |
| | | 1 | | | | | | | | ł | İ | İ |
| Gas Prod. MCFD | | | | Oil Prod. | | | | Gas/ | Gas/Oil Ratio | | | |
| The Date (D) | | | | | | | | | 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 | | | | | | | | | | | | |
| sald repo | ort is | true and | correct | . Executed | i thi | .s the | کنر | NEX. | da | y of | ne | _19_{\} |
| What Thank Danker | | | | | | | | | | | | |
| For Offset Operator For State For Company | | | | | | | | | | | | |
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| | | | | • | | | | | | Fo | orm C-5 (! | 7/88) |

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

PRODUCTIVITY TEST BARREL TEST

| OPERATOR | <u> </u> | | LOCATION O | F WELL | · · | | | | | | |
|--------------|--|--------------|---------------------------------------|--------------|---------------------------------------|--|--|--|--|--|--|
| LEASE | | | OF SEC. | | | | | | | | |
| WELL NO. | · · · · · · · · · · · · · · · · · · · | 1 | COUNTY- | · | <u> </u> | | | | | | |
| | | | PRODUCING FORMATION | | | | | | | | |
| ı | Date Taken | · | Date Effective | | | | | | | | |
| Well Dep | th | Top Pi | od. Form | Perfs | | | | | | | |
| Casing: | Size | Wt | Depth | Acid | · | | | | | | |
| Tubing: | Size | Depth | of Perfs | Gravity | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Pump: | Туре | Bore_ | | Purchase | | | | | | | |
| | tus | | | | | | | | | | |
| | Pumping, f | lowing, etc. | • | | • | | | | | | |
| | | | | TEST DATA | | | | | | | |
| | | | Permanent | | | | | | | | |
| STATUS B | EFORE TEST: | | Flowing | Swabbing | Pumping | | | | | | |
| D211100 D | PRODUCED | HOURS | | | | | | | | | |
| | SHUT IN | | | | | | | | | | |
| | • | | MINUTES | SECONDS | 5 | | | | | | |
| • | | _ | PERCENTAGE | | | | | | | | |
| | OIL | INCHES | PERCENTAGE | | | | | | | | |
| GROSS FL | UID PRODUCTION RA | ATE (BARRELS | PER DAY) | | | | | | | | |
| | | | (AY) | | | | | | | | |
| | | | z) | | | | | | | | |
| | PER MINUTE | | • | | | | | | | | |
| | F STROKE | | INCHES | | | | | | | | |
| REGULAR I | PRODUCING SCHEDU | | HOURS PER | DAY. | | | | | | | |
| COMMENTS | | | | | | | | | | | |
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| TITEMENT COT | | | · | | | | | | | | |
| WITNESSES | 5 : | | | | | | | | | | |
| FOR STATI | ₹ | | FOR OPERATOR | , | FOR OFFSET | | | | | | |