

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Conservation Division Form C-5 Revised

TEST: Initial Annual Workover Reclassification TEST DATE: 11-14-85

Company: Mobil Oil Corp. Lease: Glen Marcellus Well No.: 0 1/2"

County: Stevens Location: C SE SE Section: 25 Township: 32 Range: 35 Acres: 10

Field: North Shuck Reservoir: Chester Pipeline Connection: Northern Natural

Completion Date: 7-6-85 Type Completion (Describe): 6174 Plug Back T.D.: 15991 Packer Set At:

Production Method: Flowing Type Fluid Production: Saltwater & Oil API Gravity of Liquid/Oil: 42.0

Casing Size: 5 1/2 Weight: 15.5 I.D.: 4.950 Set At: 6396 Perforations: 6092 To: 61-23

Tubing Size: 2 7/8 Weight: 6.5 I.D.: 2.441 Set At: 6165 Perforations: To

Pretest: Starting Date: _____ Time: _____ Ending Date: _____ Time: _____ Duration Hrs.:

Test: Starting Date: 11-13-85 Time: 1:45 Ending Date: 11-14-85 Time: _____ Duration Hrs.: 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure	Separator Pressure			Choke Size						
	Casing:	Tubing:	220							
Bbls./In.	Tank Size	Number	Starting Gauge Feet	Inches	Barrels	Ending Gauge Feet	Inches	Barrels	Net Prod. Bbls. Water	Oil
Test:	300		10	1	202	11	0	220	6	18
1st:	800	6373	11	1.25	222.53	12	1.75	243.40	6	20.87
2nd:	500	6371	1	9.5	35.90	1	10	36.74	.4	.84

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections			Orifice Meter Range					
Flange Taps:	Flange Taps:	✓	Differential:	Static Pressure:				
Running	Run-Prover-Tester	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	3"	1.750			70.2	18"	.696	
Orifice								
Orifice								

GAS FLOW RATE CALCULATIONS (R)

• MCFD (Pd)(OWTC)	Meter-Prover Press. (Psia)	Extension (Fm)	Gravity Factor (FR)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
101	85	39.02	1.199	.9962		

Prod. MCFD: 746 Oil Prod. Bbls./Day: 22 Gas/Oil Ratio (GOR) = 33909 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 the report is true and correct. Executed this the 14 day of November 1985

Offset Operator: _____ For State: _____ For Company: _____

3-27-86
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 CONSERVATION DIVISION KANSAS