STATE OF KANSAS - CORPORATION COMMISSION

N 15-095-21299-60-60 Form C-5 Revised PRODUCTION TEST & GOR REPORT Conservation Division TYPE TEST: Initial TEST DATE: Annual X Workover Reclassification Company Lease Well No. Pickrell Drilling Company Kopf_"D" County Location Section Township Range Acres Kingman C SW SW 13 308 7W Field Reservoir Pipeline Connection Basil. Mississippi Completion Date Type Completion(Describe) Plug Back T.D. Packer Set At. 11-14-82 Single 4138.5 Production Method: Type Fluid Production API Gravity of Liquid/011 Flowing Pumping X Gas Lift Casing Size Weight 4 1/2" OD 10.5# Water Gas 40° Oil Set At I.D. Perforations oT41481 4129 4135 Tubing Size Set At Weight I.D. Perforations Tα 2 3/8" OD 4.7# 41331 \overline{P} retest: Duration Hrs. 9:00 am Starting Date 7-19-95 9:00 am 7-20-95 Time Time Ending Date 24 Test: Duration Hrs. 9:00 am 24 Starting Date 7-20-95 7-21-95 Time 9:00 am Time Ending Date OIL PRODUCTION OBSERVED DATA Producing Wellhead Pressure Separator Pressure Choke Size Casing: Tubing: Net Prod. Bbls./In. Tank Starting Gauge Ending Gauge Bbls. Size Number Feet Inches Barrels Feet Inches Barrels Water 011 200 5.00 53.40 2 58,40 25 126501 2 8 11 Pretest: 200 11 58.40 3 3 65.06 25 6.66 126501 2 Test: Test: GAS PRODUCTION OBSERVED DATA Orifice Meter Connections Orifice Meter Range Pipe Taps: Flange Taps: Differential: 50 Static Pressure: Run-Prover-Orifice Meter-Prover-Tester Pressure | Diff. Press. Gravity | Flowing Measuring In. Water In. Merc. Psig or (Pd) (hw) or (hd) Gas (Gg) Temp. (t) Device Tester Size Size Orifice 60 .758 Meter 0.375 80 Critical Flow Prover RECEIVED ATE CORPORATION COMMISSION Orifice Well Tester AUG Z 1 1995 GAS FLOW RATE CALCULATIONS (R) Extension Flowing Temp. Deviation Coeff. MCFD Meter-Prover Gravity Chart (Fb)(Fp)(OWTC) Press.(Psia)(Pm) Vhw x Pm Factor (Fg) | Factor (Ft) Factoriv(Epv) (Eactor)(Ed) 1.000 1.000 16.851 1.149 1.000 0.6848 94.65 Gas Prod. MCFD Oil Prod. Gas/Oil Ratio Cubic Ft. per Bbl. Bbls./Day: (GOR) -Flow Rate (R): 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 18th day of August 19 said report is true and correct. Executed this the 18th

NOTE: Meter is 50" x 50" but readings have been compensated, therefore, chart factor is 1.000

For State

For Offset Operator

For Compan