

15-095-30100-0000

STATE OF KANSAS - CORPORATION COMMISSION
PRODUCTION TEST & GOR REPORT

Conservation Division

Form C-5 Revised

TYPE TEST: Initial		Annual X Workover	Reclassification	TEST DATE:	
Company Pickrell Drilling Company		Lease Young "K"		Well No. 1	
County Kingman	Location C NE SE	Section 22	Township 29S	Range 8W	Acres 40
Field Belmont Center		Reservoir Mississippi		Pipeline Connection PNG	
Completion Date 2-4-66		Type Completion(Describe) Single		Plug Back T.D. 4585	Packer Set At
Production Method: Flowing Pumping X Gas Lift		Type Fluid Production Oil & Water		API Gravity of Liquid/Oil 36	
Casing Size 5 1/2"	Weight 14.0#	I.D. 5.012	Set At 4616	Perforations 4236	To 4245
Tubing Size 2 3/8"	Weight 4.7#	I.D. 1.995	Set At 4290	Perforations To	B.H. Separator
Pretest:		Starting Date July 6		Time 7:00	Ending Date July 7
		Time 7:00		Duration Hrs. 24	
Test:		Starting Date July 7		Time 7:00	Ending Date July 8
		Time 7:00		Duration Hrs. 24	

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size				
Casing: 60		Tubing: 60		55		Open				
Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	250	19295	2	2	43.47	2	3	45.14	82	1.67
Test:	250	19295	2	3	45.14	2	4	46.81	82	1.67
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections			Orifice Meter Range		
Pipe Taps:	Flange Taps:	X	Differential:	100"	Static Pressure:
Measuring Device	Run-Prover-Tester Size	Orifice Size	Meter-Prover-Tester Pressure	Diff. Press.	Gravity
			In.Water In.Merc. Psig or (Pd)	(hw) or (hd)	Gas (Gg)
Orifice Meter	4"	.500		55	5
Critical Flow Prover					
Orifice Well Tester					

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD	Meter-Prover	Extension	Gravity	Flowing Temp.	Deviation	Chart
(Fb)(Fp)(OWTC)	Press.(Psia)(Pm)	Chw x Pm	Factor (Fg)	Factor (Ft)	Factor (Fpv)	Factor(Fd)
1.212	69.65	18.261	1.240	1.000	1.000	1.000

Gas Prod. MCFD 0.06 Proven Gas/Oil Ratio Cubic Ft.
Flow Rate (R): 28 Bbls./Day: 2 (GOR) = 14000 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 8th day of July 1993

8-24-93

For Offset Operator

For State

For Company

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