

STATE OF KANSAS - CORPORATION COMMISSION  
 PRODUCTION TEST & GOR REPORT

15-095-01784-00-00

Form C-5 Revised

Conservation Division  
 TYPE TEST: Initial Annual  Workover Reclassification TEST DATE: JUNE 9-1986  
 Company Black Energy Co. Lease Messenger Well No. H  
 County Kingman Location SE 1/4 SE-2 Section 19 Township 29S Range 7W Acres  
 Field Spury Reservoir Miss Pipeline Connection

Completion Date Spury Type Completion (Describe) Miss Plug Back T.D. Packer Set At

Production Method: Single Type Fluid Production Water API Gravity of Liquid/Oil

Flowing  Pumping  Gas Lift   
 Casing Size 3 1/2 Weight 4.7 I.D. Set At Perforations To

Tubing Size 2 3/8 Weight 4.7 I.D. Set At Perforations To

Pretest: Starting Date JUNE 9-86 Time 10:00 Ending Date JUNE-10-86 Time 8:00 Duration Hrs. 24

Test: Starting Date Time Ending Date Time Duration Hrs.

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure		Choke Size						
Casing: <u>340</u>	Tubing: <u>85</u>									
Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:									<u>54</u>	<u>0</u>
Test:										
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections				Orifice Meter Range			
Pipe Taps:	Flange Taps:		Differential:		Static Pressure:		
Measuring Device	Run-Prover-Tester Size	Orifice Size	Meter-Prover-Tester In. Water	Pressure In. Merc. Psig or (Pd)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter	<u>2</u>	<u>15</u>			<u>35</u>	<u>18</u>	
Critical Flow Prover							
Orifice Well Tester							

GAS FLOW RATE CALCULATIONS (R)

Gcoeff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia) (Pm)	Extension $\sqrt{hw \times Pm}$	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
<u>1.219</u>		<u>20.297</u>				

Gas Prod. MCFD 38 45 Oil Prod. Bbls./Day: 0 Gas/Oil Ratio (GOR) = 38 45 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 said report is true and correct. Executed this the June day of 10 1986

STATE CORPORATION COMMISSION  
 For Offset Operator [Signature] For State [Signature] For Company [Signature]

RECEIVED  
 MAR 30 1987  
 3-30-87  
 CONSERVATION DIVISION  
 Wichita, Kansas