

15-095-20415-00-00

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Form C-5 Revised

Conservation Division
 TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 8-9-85
 Company Texaco Inc Lease Card Wells Well No. 2
 County Kingman Location NE 1/4 NW 1/4 Section 27 Township 29 Range 8 Acres 320
 Field Belmont Center Reservoir Miss Pipeline Connection Texaco - Permian
 Completion Date 12-10-75 Type Completion (Describe) oil Plug Back T.D. 4237 Packer Set At -
 Production Method: Flowing Pumping Gas Lift Type Fluid Production Oil & Water API Gravity of Liquid/Oil 34.0
 Casing Size 5 7/8 Weight 15.6 I.D. Set At Perforations 4325 To 4193
 Tubing Size 2 3/8 Weight 4.7 I.D. Set At Perforations 4169 To 4202
 Pretest: Starting Date SI all Year Time - Ending Date - Time - Duration Hrs. -
 Test: Starting Date SI Time - Ending Date - Time - Duration Hrs. -

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size				
Casing:	<u>250</u>	Tubing:	<u>250</u>	<u>250</u>		<u>-</u>				
Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
<u>1/16</u>										
Pretest:										
Test:	<u>210</u>								<u>138</u>	<u>2</u>
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections			Orifice Meter Range					
Pipe Taps:	Flange Taps:	<input checked="" type="checkbox"/>	Differential:		Static Pressure:			
Measuring Device	Run-Prover-Tester Size	Orifice Size	Meter-Prover-Tester Pressure		Diff. Press.	Gravity	Flowing	
			In. Water	In. Merc.	Psig or (Pd)	(hw) or (hd)	Gas (Gg)	Temp. (t)
Orifice Meter	<u>4</u>	<u>.750</u>						
Critical Flow Prover								
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

Coeff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Paia)(Pm)	Extension $\sqrt{hw \times Pm}$	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
<u>2.729</u>		<u>42.36</u>	<u>1.240</u>			

Gas Prod. MCFD 40 Oil Prod. Bbls./Day: 2 Gas/Oil Ratio (GOR) = 20.000 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 11 day of Nov 19 86

For Offset Operator [Signature] For State [Signature] For Company Vernon B. Pugh

STATE CORPORATION COMMISSION

DEC 4 1986 124-86