

Conservation Division

TYPE TEST: Initial Annual ^X Workover Reclassification TEST DATE:

Company Pickrell Drilling Company Lease Kopf 'D' Well No. 2

County Kingman Location 200' SW of C NW SW Section 13 Township 30S Range 7W Acres

Field Basil Reservoir Miss Pipeline Connection None

Completion Date 12-21-83 Type Completion(Describe) Single Plug Back T.D. 4176 Packer Set ---

Production Method: Flowing Pumping ^X Gas Lift Type Fluid Production Oil, water API Gravity of Liquid/ 40

Casing Size 4 1/2" OD Weight 10.5 # I.D. Set At 4197 Perforations 4124 To 4134

Tubing Size 2 3/8" OD Weight 4.7# I.D. Set At 4145 Perforations Open ended To

Pretest: Starting Date 8-14-92 Time 9:00 AM Ending Date 8-15-92 Time 9:00 AM Duration 24

Test: Starting Date 8-15-92 Time 9:00 AM Ending Date 8-16-92 Time 9:00 AM Duration 24

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size			
Casing: 4 1/2" OD	Tubing: 2 3/8"				80 lb		310375		
Bbls./In.	Tank	Starting Gauge			Ending Gauge			Net Prod. Bbl.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water Oil
Pretest:	200	126501	4	3	85.05	4	5	88.38	63 3.33
Test:	200	126500	4	5	88.38	4	7	91.71	63 3.33
Test:									

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections				Orifice Meter Range			
Pipe Taps:	Flange Taps:		^X	Differential:	50	Static Pressure:	100
Measuring Device	Run- Size Orifice Size	Meter- Pressure In.Water	Meter- Pressure In.Merc.	Pressure Psig	Diff. Press. (hw)	Gravity Gas (Gg)	Flowing Temp. (F)
Orifice Meter	0.375			66	RECEIVED	.758	60°
Critical Flow Prover					STATE CORPORATION COMMISSION		
Orifice Well Tester					SEP 21 1992	9-21-92	

GAS FLOW RATE CALCULATIONS (CONSERVATION DIVISION)

Coeff. MCFD (Fb)	Meter- Press. Press.(Psia)	Extension $\sqrt{hw \times Pm}$	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor
0.6848	80.65		1.149	1.000	1.000	1.000

Gas Prod. MCFD Oil Prod. Bbls./Day: 3 Gas/Oil Ratio (GOR) = 2333 Cubic Flow Rate (R): 7 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 _____ day of _____ 19____

For Offset Operator For State For Company

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