

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-173-20745-0000

Conservation Division

Form C-5 Revised

TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 6-12-86
 Company Donald C. Slawson Lease Hillman Hill Well No. 2
 County Sedawick Location NE 1/4 Section 11 Township 29 Range 10 Acres
 Field 1 Reservoir SIMPSON Pipeline Connection IN HAND
 Completion Date _____ Type Completion (Describe) _____ Plug Back T.D. _____ Packer Set At _____

Production Method: _____ Type Fluid Production oil & water API Gravity of Liquid/Oil _____
 Flowing Pumping Gas Lift _____
 Casing Size 4 1/2 Weight _____ I.D. _____ Set At _____ Perforations _____ To _____
 Tubing Size 2 3/8 Weight _____ I.D. _____ Set At _____ Perforations _____ To _____

Pretest: _____ Duration Hrs. _____
 Starting Date _____ Time _____ Ending Date _____ Time _____
 Test: _____ Duration Hrs. _____
 Starting Date 6-12-86 Time 1:00 PM Ending Date 6-13-86 Time 1:30 PM Duration Hrs. 24

OIL PRODUCTION OBSERVED DATA

| Producing Wellhead Pressure | | Separator Pressure | | | Choke Size | | |
|-----------------------------|-------------|--------------------|----------|--------------|------------|-----------------|------------|
| Casing: | Tubing: | | | | | | |
| Bbls./In. | Tank | Starting Gauge | | Ending Gauge | | Net Prod. Bbls. | |
| | Size Number | Feet | Inches | Feet | Inches | Water | Oil |
| Pretest: | <u>2</u> | | | | | | |
| Test: | <u>200</u> | <u>3945</u> | <u>2</u> | <u>0</u> | <u>40</u> | <u>9</u> | <u>6</u> |
| Test: | | | | | | <u>190</u> | <u>7</u> |
| Test: | | | | | | | <u>150</u> |

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 Pressure | | Diff. Press. | Gravity | Flowing | |
| | | | In. Water | In. Merc. | Psig or (Pd) | (hw) or (hd) | Gas (Gg) | Temp. (t) |
| Orifice Meter | | | | | | | | |
| Critical Flow Prover | | | | | | | | |
| Orifice Well Tester | | | | | | | | |

GAS FLOW RATE CALCULATIONS (R)

| Coeff. (Fb) | MCFD (Fp) | Meter-Prover Press. (Psia) | Extension | Gravity Factor (Fg) | Flowing Temp. Factor (Ft) | Deviation Factor (Fpv) | Chart Factor (Fd) |
|-------------|-----------|----------------------------|-----------------------|---------------------|---------------------------|------------------------|-------------------|
| (OWTC) | (Pm) | (Pm) | $\sqrt{hw \times Pm}$ | (Fg) | (Ft) | (Fpv) | (Fd) |
| | | | | | | | |

Gas Prod. MCFD JUN 24 1986 Oil Prod. Bbls./Day: 150 Gas/Oil Ratio (GOR) = _____ Cubic Ft. per Bbl. _____
 Flow Rate (R): _____

The undersigned Conservation Division, 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 _____ day of _____ 19____
 Wichita, Kansas

For Offset Operator _____ For State _____ For Company Stanley Withiam