

Conservation Division

PRODUCTION TEST & GOR REPORT 15-095-19015-0001 Form C-5 Revised

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company McCoy Petroleum Corporation Lease Robertson "A" Well No. 2

County Kingman Location C NE NE Section 33 Township 29S Range 6W Acres

Field Rosedale Pool Reservoir Mississippian Pipeline Connection Texaco - Wichita Gas

Completion Date 4-9-64 Type Completion(Describe) Perforations Plug Back T.D. 4200' Packer Set At

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

Flowing Pumping X Gas Lift Oil-Gas-SW

Casing Size 5-1/2" Weight 14# I.D. Set At 4499' Perforations 4133-4142' To

Tubing Size 2-3/8" Weight 4.7# I.D. Set At 4175' Perforations To

Pretest:		Duration Hrs.	
Starting Date	Time	Ending Date	Time
Test:		Duration Hrs.	
Starting Date	Time	Ending Date	Time
9-3-93	8:00	9-4-93	8:00
		24	

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure			Choke Size					
Casing:		Tubings:								
Bbls./In.	Tank		Starting Gauge			Ending Gauge			Net Prod. Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:	200		5	10	116.90	6	0	120.24		3.34
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 Pressure			Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
			In.Water	In.Merc.	Psig or (Pd)			
Orifice Meter	2	3/8			380	4.0	.650	60
Critical Flow Prover								
Orifice Well Tester								

GAS FLOW RATE CALCULATIONS (R)

Coeff. (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)
.6850		38.98	1.240	1.000	1.000	1.000
Gas Prod. MCFD	Oil Prod. Bbls./Day:	Gas/Oil Ratio (GOR) =	Cubic Ft. per Bbl.			
Flow Rate (R):	33.109	3.34	9.912			

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 4 day of Sept 1993

For Offset Operator

For State

*[Signature]*  
For Company