

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

15-095-21335-0000 Form C-5 Revised

Conservation Division

TYPE TEST: Initial Annual X Workover Reclassification TEST DATE:

Company: Pickrell Drilling Company Lease: Kopf "E" Well No.: 1

County: Kingman Location: C NW/4 NW/4 Section: 24 Township: 30S Range: 7W Acres:

Field: Basil Reservoir: Miss Pipeline Connection: KGS

Completion Date: 5-1-83 Type Completion(Describe): Single Plug Back T.D.: 4186 Packer Set At: ----

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

Flowing	Pumping	X Gas Lift	Oil	Water	39°	
Casing Size	Weight	I.D.	Set At	Perforations	To	
4 1/2" OD	10.5#		4224'	4144	4155	
Tubing Size	Weight	I.D.	Set At	Perforations	To	
2 3/8" OD	4.7#		4170			

Pretest:		Duration Hrs.	
Starting Date	7-15-96	Time	9:00
Ending Date	7-16-96	Time	9:00
Test:		Duration Hrs.	
Starting Date	7-16-96	Time	9:00
Ending Date	7-17-96	Time	9:00

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure		Separator Pressure			Choke Size					
Casing:	4 1/2"	Tubing:	2"			70				
Bbls./In.	Tank	Starting Gauge			Ending Gauge			Net Prod. Bbls.		
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:	250	9968	2	0	40.11	2	3	45.11	45	5.00
Test:	250	9969	2	3	45.11	2	6	50.11	45	5.00
Test:										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections			Orifice Meter Range					
Pipe Taps:	Flange Taps:	Differential:	50	Static Pressure:	1000			
Measuring Device	Run-Prover-Tester	Orifice Size	Meter-Prover-In. Water	Tester-Pressure In. Merc.	Pressure (Psig) or (Rd)	Diff. Press. (hw) or (hd)	Gravity Gas (Gg)	Flowing Temp. (t)
Orifice Meter								
Critical Flow Prover		NO GAS FLOWING			AUG 28 1996	8-28-96		
Orifice Well Tester					CONSERVATION DIVISION WICHITA KS			

GAS FLOW RATE CALCULATIONS (R)

Coeff. (Fb)(Fp)(OWTC)	Meter-Prover Press. (Psia)	Extension (Pm)	Gravity Factor (Fg)	Flowing Temp. Factor (Ft)	Deviation Factor (Fpv)	Chart Factor (Fd)
		√hw x Pm		1.000	1.000	1.000

Gas Prod. MCFD: 0 Oil Prod. Bbls./Day: 5 Gas/Oil Ratio (GOR): -0- 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 26th day of August 1996

For Offset Operator

For State

For Company

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