

STATE OF KANSAS - CORPORATION COMMISSION
PRODUCTION TEST & GOR REPORT

15-185.23179-0000

Conservation Division Form C-5 Rev.

TYPE TEST: Initial Annual Workover Reclassification TEST DATE: 09/23/03

Company: Harris Oil & Gas Company Lease: Teichman Unit Well No. 1-8

County: Stafford Location: 100 FSL & 1200 FWL Section: 8 Township: 22 Range (E/W): 12W Acres:

API Well Number: 15- Reservoir(s): Lansing/Arbuckle Gas Pipeline Connection:

Completion Date: Type of Completion (Describe): Single oil Plug Back T.D.: 3728' Packer Set At:

Lifting Method: None Pumping Gas Lift ESP Type Liquid: Oil & Water API Gravity of Liquid/Oil: 32

Casing Size: 5 1/2" Weight: 19.5+17.5 LD. Set At: 3816 Perforations: 3418' To 3422

Tubing Size: 2 7/8" Weight: LD. Set At: 3700 Perforations: To

Pretest: Starting Date: Time: AM/PM Ending Date: Time: AM/PM

Test: Starting Date: 09/22/03 Time: 1:00 AM/PM Ending Date: 09/23/03 Time: 1:00 AM/PM

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure			Separator Pressure			Choke Size				
Casing:	Psig	Tubing:	Psig	Psig	Psig					
Bbls./In.	Stock Tank		Starting Gauge			Ending Gauge			Net API Bbls.	
1.67	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest									220	
Test	200	300118	7	11	158.65	8	10	177.02		18.37
Test										

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections (Yes/No)			Orifice Meter Range					Static Pressure:		
Pipe Taps:	Flange Taps:		Differential:							
Type Measuring Device	Entry Size	Orifice Size	Meter-Prover-Tester Pressure					Diff. Press. (h _w) or (h _d)	Gas Gravity (G _p)	Flowing Temp. (t)
			In. Water	In. Merc.	Psig or (P _d)	%CO ₂	H ₂ Sppm			
Orifice Meter										
Critical Flow Prover										
MERLA Well Tester										

GAS FLOW RATE CALCULATIONS (R)

Coeff. MCFD (F _w) (F _p)	Meter-Prover Press. (P _{sia})(P _m)	Press. Extension $\sqrt{h_w \cdot P_m}$	Gravity Factor (F _g)	Flowing Temp. Factor (F _t)	Deviation Factor (F _v)	Sqr. Rt. Chart Factor (F _d)

Gas Prod. MCFD Flow Rate (R): 0 Oil Prod. Bbls./Day: 18.37 Gas/Oil Ratio (GOR) = Cubic Feet 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 23 day of September 192003

RECEIVED
For Offset Operator: SEP 29 2003
For Commission: Richard W. Lucy
For Company: [Signature] (Rev. 10/96)

KCC WICHITA

PRODUCTIVITY TEST
BARREL TEST

OPERATOR _____ LOCATION OF WELL _____
 LEASE _____ OF SEC. _____ T _____ R _____
 WELL NO. _____ COUNTY _____
 FIELD _____ PRODUCING FORMATION _____
 Date Taken _____ Date Effective _____
 Well Depth _____ Top Prod. Form _____ Perfs _____
 Casing: Size _____ Wt. _____ Depth _____ Acid _____
 Tubing: Size _____ Depth of Perfs _____ Gravity _____
 Pump: Type _____ Bore _____ Purchaser _____
 Well Status _____
 Pumping, flowing, etc.

TEST DATA

Permanent _____ Field _____ Special _____
 Flowing _____ Swabbing _____ Pumping _____

STATUS BEFORE TEST:

PRODUCED _____ HOURS
 SHUT IN _____ HOURS
 DURATION OF TEST _____ HOURS _____ MINUTES _____ SECONDS
 GAUGES: WATER _____ INCHES _____ PERCENTAGE
 OIL _____ INCHES _____ PERCENTAGE
 GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) _____
 WATER PRODUCTION RATE (BARRELS PER DAY) _____
 OIL PRODUCTION RATE (BARRELS PER DAY) _____ PRODUCTIVITY
 STROKES PER MINUTE _____
 LENGTH OF STROKE _____ INCHES
 REGULAR PRODUCING SCHEDULE _____ HOURS PER DAY.

COMMENTS _____

WITNESSES:

FOR STATE _____ FOR OPERATOR _____ FOR OFFSET _____