

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Conservation Division Form C-5 Rev.

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company American Warrior, Inc. Lease Crawford "A" Well No. 2

County Stafford Location C N/2 N/2 NE Section 7 Township 22 Range (E/W) 12W Acres

API Well Number 15-185-23,203 Reservoir(s) KC Gas Pipeline Connection N/A

Completion Date 11-12-03 Type of Completion (Describe) single oil & gas Plug Back T.D. Packer Set At

Lifting Method: None Pumping X Gas Lift ESP Type Liquid OIL API Gravity of Liquid/Oil 36.0 @ 41.0

Casing Size 5 1/2" Weight 15.5 ID. Set At 3665 Perforations 3438 To 3485

Tubing Size 2 3/8" Weight 4.70 ID. Set At 1.995 Perforations 3570 To

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

Test Starting Date 03/03/04 Time 10:00 AM/PM Ending Date 03/04/04 Time 10:00 AM/PM

OIL PRODUCTION OBSERVED DATA

Producing Wellhead Pressure Casing: 650 Psig Tubing: 180 Psig Separator Pressure 35 Psig Choke Size

Bbls./In.	Stock Tank		Starting Gauge			Ending Gauge			Net API Bbls.	
	Size	Number	Feet	Inches	Barrels	Feet	Inches	Barrels	Water	Oil
1.67										
Pretest:										
Test:	300	300145	3	10	76.82	13	6	270.54		193.72
Test:	300	300146	5	10.5	70.50	5	10.5	70.50		0

GAS PRODUCTION OBSERVED DATA

Orifice Meter Connections (Yes/No) Pipe Taps: Flange Taps: Orifice Meter Range Differential: Static Pressure:

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	2.00	.250			18					

GAS FLOW RATE CALCULATIONS (R)

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

Gas Prod. MCFD Flow Rate (R): 43.90 Oil Prod. Bbls./Day: 193.72 Gas/Oil Ratio (GOR) = 226.61 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 4 day of March 19 2002

Ronald W. Lopez For Commission *Bob Kaiser* For Company

For Offset Operator

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