

STATE OF KANSAS - CORPORATION COMMISSION
 PRODUCTION TEST & GOR REPORT

Form C-5 Revised

Conservation Division

TYPE TEST: Initial Annual Workover Reclassification TEST DATE:

Company Petroleum Inc Lease Sherer F-1 Well No.

County _____ Location _____ Section _____ Township _____ Range _____ Acres _____

Field _____ Reservoir _____ Pipeline Connection _____

Completion Date _____ Type Completion(Describe) _____ Plug Back T.D. _____ Packer Set At _____

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

Flowing _____ Pumping _____ Gas Lift _____
 Casing Size _____ Weight _____ I.D. _____ Set At _____ Perforations _____ To _____

Tubing Size _____ Weight _____ I.D. _____ Set At _____ Perforations _____ To _____

Pretest: _____ Duration Hrs. _____

Starting Date _____ Time _____ Ending Date _____ Time _____

Test: _____ Duration Hrs. _____

Starting Date _____ Time _____ Ending Date _____ Time _____

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	Barrels	Feet	Inches	Barrels	Water	Oil
Pretest:										
Test:										
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								
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)

Gas Prod. MCFD _____ Oil Prod. Bbls./Day: _____ Gas/Oil Ratio (GOR) = _____ 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 the _____ day of _____ 19 _____

For Offset Operator

For State

For Company

STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

NP

PRODUCTIVITY TEST
BARREL TEST

OPERATOR Petroleum Inc LOCATION OF WELL C NW SW
 LEASE Sherer E OF SEC. 1 T 28 R 20
 WELL NO. F-1 COUNTY Kiowa
 FIELD Fralick PRODUCING FORMATION MISSISSIPPI
 Date Taken 5-31-90 Date Effective 5-31-90
 Well Depth 4891 Top Prod. Form 4889-91 Perfs
 Casing: Size 5 1/2 Wt. 14 Depth 4889 Acid
 Tubing: Size 2 3/8 Depth of Perfs 4889-91 Gravity
 Pump: Type insert Bore 1 1/4 Purchaser
 Well Status Flowing Pumping
 Pumping, flowing, etc.

TEST DATA

Permanent X Field X Special
 Flowing Swabbing Pumping X

STATUS BEFORE TEST:

PRODUCED 24 HOURS
 SHUT IN 0 HOURS

DURATION OF TEST HOURS MINUTES SECONDS

GAUGES: WATER INCHES PERCENTAGE
 OIL INCHES PERCENTAGE

GROSS FLUID PRODUCTION RATE (BARRELS PER DAY) 5 1/2
 WATER PRODUCTION RATE (BARRELS PER DAY) 1/2
 OIL PRODUCTION RATE (BARRELS PER DAY) 5 PRODUCTIVITY
 STROKES PER MINUTE
 LENGTH OF STROKE INCHES
 REGULAR PRODUCING SCHEDULE 24 HOURS PER DAY.

COMMENTS

WITNESSES:

Richard W. Lacey FOR STATE Terry Taylor FOR OPERATOR FOR OFFSET

STATE OF KANSAS
 MAY 31 1990