## Production Test &GOR Report

**State of Kansas - Corporation Commission**

**Production Test & GOR Report**

**Type Test:** Initial

**Company:** Ritchie Exploration Inc.

**County:** Graham

**Location:** Section Township Range Acres

**Field:** Nebraska

**Reservoir:** Lack

**Completion Date:** Type Completion (Describe): Plug Back T.D.

**Pipe Line Connection:** Packer

**Production Method:** Pumping

**Flowing Method:** Gas Lift

**Casing Size:** 4 1/2

**Casing Weight I.D.:** 3 3/8

**Tubing Size:** 2 3/8

**Tubing Weight I.D.:** 3 1/4

**API Gravity of Liquid/Oil:** 38 45

**Producing Wellhead Pressure:**

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<td></td>
<td></td>
<td>Feet</td>
<td>Inches</td>
<td>Barrels</td>
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<tr>
<td>Pretest:</td>
<td>200</td>
<td>4</td>
<td>2</td>
<td>83.57</td>
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<td>Test:</td>
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**OIL PRODUCTION OBSERVED DATA**

**Separator Pressure:**

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**GAS PRODUCTION OBSERVED DATA**

**Orifice Meter Connections**

**GAS FLOW RATE CALCULATIONS (R)**

**Gas Prod. MCFD:**

**Flow Rate (R):**

**Oil Prod.:**

**Gas/Oil Ratio:**

**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 1989.

**For Offset Operator:**

**For State:**

**For Company:**

Form C-5 (5/88)
STATE CORPORATION COMMISSION OF KANSAS, CONSERVATION DIVISION

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 ___________________________________