## Production Test &GOR Report

### Conservation Division

#### Type Test: Initial
- **Company:** Dunne Oil Co.
- **Field:** Dripping Springs
- **Location:** Kansas City, Kansas
- **Reservoir:** Koch

#### Reclassification:
- **County:** Graham
- **Section:** 36
- **Township:** 7
- **Range:** 25
- **Acres:**

#### Completion Date:
- **Type Completion (Describe):** Plug Back T.D.
- **Pipeline Connection:**
- **Reusables & Tubing:**

#### Production Method:
- **Type Fluid Production:** Oil
- **API Gravity of Liquid/Oil:** 38.2° C 60°F

### Flowing:
- **Casing Weight:** 5.0 lb/ft
- **Casing Size:** 5 1/2
- **Tubing Weight:** 2.0 lb/ft
- **Tubing Size:** 2 3/8

#### Pumping:
- **Gas Lift:**

### Production:

#### Pretest:
- **Starting Date:** 1-9-95
- **Ending Date:** 1-10-95

#### Test:
- **Starting Date:** 1-10-95
- **Ending Date:** 1-10-95

### Production Wellhead Pressure:

<table>
<thead>
<tr>
<th>Casing:</th>
<th></th>
<th>Tank</th>
<th>Bbls./In.</th>
<th>Size</th>
<th>Number</th>
<th>Feet</th>
<th>Inches</th>
<th>Barrels</th>
<th>Press. (Psia) (Pm)</th>
<th>Extension (h) x Pm</th>
<th>Gravity Factor (Fg)</th>
<th>Flowing Temp. Factor (Fp)</th>
<th>Deviation Factor (Fp)</th>
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### Separator Pressure:

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<th>Size</th>
<th>Number</th>
<th>Feet</th>
<th>Inches</th>
<th>Barrels</th>
<th>Press. (Psia) (Pm)</th>
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### Choke Size:

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<th>Size</th>
<th>Number</th>
<th>Feet</th>
<th>Inches</th>
<th>Barrels</th>
<th>Press. (Psia) (Pm)</th>
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### Gas Production Observed Data:

<table>
<thead>
<tr>
<th>Orifice Meter Connections</th>
<th>Orifice Meter Range</th>
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<tbody>
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### Gas Flow Rate Calculations (R):

- **Coeff. MCFD (Fb)(Fp)(OWTC):**
- **Meter-Prover Press. (Psia) (Pm):**
- **Flow Rate (R):** Bbls./Day: 104

### Gas Prod. MCFD:

<table>
<thead>
<tr>
<th>Coeff. MCFD</th>
<th>Meter-Prover Press. (Psia) (Pm)</th>
<th>Flow Rate (R): Bbls./Day</th>
<th>Gas/Oil Ratio</th>
<th>Cubic Ft. per Bbl.</th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>104</td>
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</tbody>
</table>

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 10 day of Jan. 1995.

For Offset Operator:  
For State:  
For Company:  

Form C-5 (5/88)