

## Category (Check One)

- ☒ Initial  
☐ Annual  
☐ Retest  
☐ Recompletion

Post Office Box 52000-2000

Oklahoma City, Oklahoma 73152-2000

## Production or Potential Test

OAC 165:10-13-3

Please type or print using black ink.

Operator XTO Energy Inc.			Operator No. 21003	
Address 210 Park Avenue, Suite 2350			Phone No. 405-232-4011	
City Oklahoma City	State Oklahoma	Zip 73102	FAX No. 405-236-0995	

<input type="checkbox"/> Allocated Oil Well (field rules)	<input type="checkbox"/> Unallocated per well (spaced)	<input type="checkbox"/> Unallocated per lease (unspaced)
<input type="checkbox"/> Enhanced Recovery Unit Order No. _____	<input type="checkbox"/> Horizontal Order No. _____	<input type="checkbox"/> Discovery Well Order No. _____

Well Name/No. <b>Ardmore Airport 3-18H</b>		Prod. Unit No. 019-211490		API No. 019-25849	
Surface Location within Sec. 550' FSL & 1450' FEL		Sec. 18	Twp. 3S	Rge. 3E	County Carter
Bottom Location within Sec. 50' FNL & 1862' FEL		Sec. 18	Twp. 3S	Rge. 3E	County Carter

## Test

Gas-Oil Ratio		Date	Time	24 Hr. Prod.		Gravity
Present	8006 : 1	Start	11/3/2013	Oil	311 Bbls	54
Initial		End	11/4/2013	Gas	2490 cf	0.77
				Water	1256 Bbls	

Pool Name/No.		Perfs 12518-17248'	
Producing formation(s) Woodford			
Date 1st Prod. 10/20/2013	No. wells on lease (list on reverse)	Is production metered together?	
		yes	no X
Oil Purchaser Vitol		OTC No.	22580
Gas Measurer Cross Timbers Energy Services		OTC No.	16512

Load oil ☐ yes ☒ no amount \_\_\_\_\_ bbls

Spacing Order No. 559902	size 640	Increased Density Order No. 606920	Location Exception Order No. 607005, 607843
Commingling Order No. N/A		Multiple Zone Completion Order No. N/A	

## Horizontal

Unit Acre Size 640	True Vertical Depth 11522'	Horizontal Component 4687	Ft. of Lateral 4730
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☐ (A) Pipe Tap ☒ (B) Orifice Tester ☐ (C) Size Tester \_\_\_\_\_

Choke sz 53/64"	Tubing sz 2 3/8"	Casing sz 5 1/2"	Gas Meter Type EFM	Size Run (A) 4.030"	Differential (A)
Size Plate (A,C) 2.5"		24-H. Coeff (B,C)		Pressure (lbs, H <sub>2</sub> O, Hg) (B,C)	

over

[illegible]

Kelbie Waggoner  
Signature of Operator's Representative

Debbie Waggoner, Regulatory Analyst  
Name & Title (Typed or Printed)

Signature of Corporation Commission Representative

Name &amp; Title (Typed or Printed)

Signature of DISCOVERY TEST OFFSET OPERATOR

Company Name \_\_\_\_\_

## INSTRUCTIONS

- 1 Use a separate form for each well unless testing an unallocated lease or EOR unit.
- 2 Testing time shall be not less than 6 hours or more than 24 hours.
- 3 Test shall be submitted within 30 days after completion. No allowable shall be assigned to the well until this form has been accepted by the division.
- 4 Effective date of test is the completion date; late-filed tests are effective the first day following the month the test is accepted by the division; no allowable shall be assigned to the well until the Form 1002A and logs have been accepted by the division.
- 5 Allowable shall be the rate indicated on the Allocated or Discovery Well Allowables Tables, whichever is appropriate, or by special field rules.
- 6 Discovery initial tests must be witnessed by a representative of any offset operator in the pool and a representative of the division, unless waived.
- 7 Operator chooses between a lease or well allowable if the formation is unspaced. A lease allowable is the shallowest 10-acre allowable from the allowable table for each well; a well allowable uses 10-acre spacing from the allowable table.
- 8 Falsification of reports is subject to penalty, O.S.L. 1933.