# BACK PRESSURE TEST FOR NATURAL GAS WELLS

**OAC 165:10-17-6**

<table>
<thead>
<tr>
<th>Operator</th>
<th>Operator #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>City</td>
</tr>
<tr>
<td>E-mail</td>
<td>Ph</td>
</tr>
<tr>
<td>Gas Volumes to be Reported to OCC by:</td>
<td>Gas Volume Reporter #</td>
</tr>
<tr>
<td>Producing Zone</td>
<td>OTC Lease #</td>
</tr>
<tr>
<td>Surface Location</td>
<td>(OCC use) Allowable #</td>
</tr>
<tr>
<td>Zone Location (if different)</td>
<td>County</td>
</tr>
<tr>
<td>Field</td>
<td>Spacing Size</td>
</tr>
</tbody>
</table>

## COMPLETION:
- [ ] Single
- [ ] Multiple Zone
- [ ] Commingled
- [ ] Recompletion
- Date of Completion

<table>
<thead>
<tr>
<th>Total Depth</th>
<th>Plug Back Depth</th>
<th>Packer Set Depth</th>
<th>Elevation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Csg Size</td>
<td>WT</td>
<td>d</td>
<td>Depth Set</td>
</tr>
<tr>
<td>Tbg Size</td>
<td>WT</td>
<td>d</td>
<td>Depth Set</td>
</tr>
<tr>
<td>L</td>
<td>H</td>
<td>G_o</td>
<td>%CO_2</td>
</tr>
</tbody>
</table>

## SHUT-IN DATA

### PRESS (HRS) LINE SIZE

### ORIFICE PRESSURE (PSIG) DIFFERENTIAL (INCHES)

### TEMP (F) X TEMP (F)

### TEMP (PSIG) TEMP (PSIG)

### BHP DATA FLOW (HRS)

## RATE OF FLOW CALCULATIONS

- Gas/Liquid Hydrocarbon Ratio MCF/BBL
- API Gravity of Liquid Hydrocarbons Deg.
- Specific Gravity Separator Gas Specific Gravity Flowing Fluid
- Critical Pressure PSIA Critical Pressure PSIA
- Critical Temperature R Critical Temperature R

## FLOW DATA

- P_t TEMP. R T Z
- P_t (PSIA) P_t^2
- P_w P_w^2 P_w^2 - P_t^2
- \( \frac{P_t^2}{P_w^2} - 1 \) (Not to exceed 5.263)
- \( \frac{P_t^2}{P_w^2} \) = WHAOF - Q
- \( \frac{P_t^2}{P_w^2} \ni \)

## FLOW DATA

- Calculated wellhead open flow
- MCFD @ 14.65
- Angle of Slope
- Slope, n

## Remarks

Approved by Commission: Conducted by: Calculated by: Checked by:

WITNESSED - OCC FIELD STAFF: Y N NAME: DATE:
IF THE ALLOWABLE FOR THIS WELL HAS BEEN ADJUSTED BY COMMISSION ORDER, PLEASE GIVE THE ORDER NUMBER(S) IN ONE OR MORE OF THE CATEGORIES BELOW:

INCREASED DENSITY ___________________________ LOCATION EXCEPTION * ___________________________

COMMINGLING ___________________________ MULTIPLE ZONE ___________________________

SEPARATE OR SPECIAL ALLOWABLE * ___________________________

OTHER PENALTY ORDER(S) * ___________________________

* FOR THESE ORDER TYPES, PLEASE DESCRIBE ALLOWABLES AND/OR PENALTIES:

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

__________________________
SIGNATURE

__________________________
TITLE

__________________________
COMPANY

__________________________
DATE

__________________________
PHONE NO.

Pc  SHUT-IN PRESSURE, PSIA (LENGTH OF SHUT-IN MINIMUM OF 24 HOURS).
Pw  STATIC COLUMN WELLHEAD PRESSURE CORRESPONDING TO THE FLOWING WELLHEAD PRESSURE, PSIA (TO BE RECORDED AT END OF EACH FLOW RATE.) THE VALUE OF Pw SHOULD NOT EXCEED 90% OF Pc.
Gg  SPECIFIC GRAVITY OF SEPARATOR GAS (AIR = 1.000).
L   LENGTH OF THE FLOW STRING FROM THE MIDDLE OF THE PRODUCING FORMATION TO THE PRESSURE POINT AT WELLHEAD, FEET.
H   VERTICAL DEPTH CORRESPONDING TO L, FEET.
Q   24 HOUR RATE OF FLOW, MCF/D.
d   INSIDE DIAMETER, INCHES.
R   DEGREES, RANKINE (DEGREES FAHRENHEIT ABSOLUTE).
Pr  REDUCED PRESSURE, DIMENSIONLESS.
Tr  REDUCED TEMPERATURE, DIMENSIONLESS.
Z   COMPRESSIBILITY FACTOR, DIMENSIONLESS.