

WELL TEST AND STIMULATION INFORMATION

TEST CODE : XXX=NOGJ=PT=01=80

KIND OF WELL TEST AND STIMULATION : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

PROVINCE NAME : XXXXXXXXXXX

AREA NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIELD OFFICE NAME : XXXXXXXXXXX

FIELD OR PROSPECT NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

WELL NAME : XXX=XXXX

WORKOVER NUMBER : 99

STRING NAME : XXXXXXXXXXXXXXXXXXXXXXX

KIND OF COMPLETED ZONE : XXXXXXXXXXXXXXX

WELL STATUS : XXX

FORMATION NAME : XXXXXXXXXXXXXXX

RESERVOIR UNIT CODE : XXXX . XXXX . XXXX . XXXX . XXXX . XXXX . XXXX . XXXX

LAYER NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

TEST PERIOD : DD MM YYYY = DD MM YYYY

WELL TEST AND STIMULATION INFORMATION
 DD:MM:YY
 PAGE=999

FLUID ANALYSIS

API OIL GRAVITY : 99.99 [°API]
 API POUR POINT : 99.99 [°C]
 WATER SALINITY : 999.999 [PPM]
 GAS GRAVITY : 9.99 [AIR=1]

GAS MAIN COMPONENT

H2S : 99.99 [% VOL]
 CO2 :
 O2 :
 N2 :
 C1 :
 C2 :
 C3 :
 C4 :
 C5+ :
 OTHER COMPONENTS : 99.99 [% VOL]

TEST ANALYSIS RESULT

PC : 999.99 [KG/CM2]
 FLOW CAPACITY : 999.9999 [MULTIDARCY M]
 PERMEABILITY : 999.9999 [MICRIDARCY]
 SKIN FACTOR : 999.99
 DAMAGE RATIO : 99.99 [%]

PRODUCTIVITY INDEX

IDEAL : 999.99 [M3/D/KG/CM2]
 ACTUAL : 999.99 [M3/D/KG/CM2]

FLOW EFFICIENCY : 9.999 [PERCENTION]
 QMAX : 99.9999 [M3/D]
 ABSOLUTE OREN FLOW POTENTIAL : 99.9999 [M M3/D]

REFERENCE REPORT

FLOW TEST REPORT

TITLE :
 DATE :
 REFERENCE NUMBER :
 AUTHOR :
 ORGANIZATION :
 GE AUTHOR :

XX
 XXX
 DD MM YYYY
 XXX
 XXX
 XXX
 (GO=IT)

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

WELL TEST AND STIMULATION INFORMATION

FLUID ANALYSIS REPORT
TITLE :
DATE :
REFERENCE NUMBER :
AUTHOR :

ORGANIZATION OF AUTHOR :
FLOW TEST ANALYSIS REPORT
TITLE :
DATE :
REFERENCE NUMBER :
AUTHOR :

ORGANIZATION OF AUTHOR :
FLOW TEST ANALYSIS REPORT
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ORGANIZATION OF AUTHOR :
FLOW TEST ANALYSIS REPORT
TITLE :
DATE :
REFERENCE NUMBER :
AUTHOR :

WELL TEST AND STIMULATION INFORMATION

TEST CODE : XXX-M001-PT-01-80

KIND OF WELL TEST AND STIMULATION : XXXXXXXXXXXXXXXXXXXXXXXXX

PROVINCE NAME : XXXXXXXXX

AREA NAME : XXXXXXXXXXXXXXXXXXXXXXXXX

FIELD OFFICE NAME : XXXXXXXXX

FIELD OR PROSPECT NAME : XXXXXXXXXXXXXXXXXXXXXXXXX

WELL NAME : XXX-XXXX

WORKOVER NUMBER : 99

STRING NAME : XXXXXXXXXXXXXXXXXXXXXXX

RIND OF COMPLETED ZONE : XXXXXXXXXXXXXXX

WELL STATUS : XXX

FORMATION NAME : XXXXXXXXXXXXX

RESERVOIR UNIT CODE : XXXX XXXX XXXX XXXX XXXX XXXX

LAYER NAME : XXXXXXXXXXXXXXXXXXXXXXXXX

TEST PERIOD : 00 MM YYYY - 00 MM YYYY

WELL TEST AND STIMULATION INFORMATION

TEST INTERVAL	9999.9	9999.9	[M]
SURVEYOR	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
KIND OF INJECTION TEST	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
TYPE OF INJECTION TEST	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
WITH OR WITHOUT BOTTOMHOLE PRESSURE SURVEY	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
KIND OF INJECTION FLUID	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
TREATMENT FOR INJECTION FLUID	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
FILTRATION ADJECTIVES	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
TEST RECORD	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX
CUMULATIVE INJECTION VOLUME	999.999.9	[M3]	
AVERAGE DAILY INJECTION RATE	9.999.9	[M3]	
MAXIMUM WELHEAD FOLLOWING PRESSURE	999.9	[K5/CM2]	
MAXIMUM BOTTOMHOLE FOLLOWING PRESSURE	9.999.9	[K5/CM2]	
BOTTOMHOLE FOLLOWING PRESSURE AT STABILIZED CONDITION	9.999.9	[K5/CM2]	
BOTTOMHOLE TEMPERATURE	999.99	[°C]	
TEST RESULT			
FLOW CAPACITY	999.999.99	[M3/D/CM2]	
PERMEABILITY	9.999.99	[MILLIDARCY]	
SKIN FACTOR	999.99	[%]	
DAMAGE RATIO	99.99	[%]	
INJECTIVITY INDEX			
IDEAL	999.99	[M3/D/KG/CM2]	
ACTUAL	999.99	[M3/D/KG/CM2]	

FLOW EFFICIENCY : 98.5 (PERCENT)

REFERENCE REPORT

INJECTION REPORT

TITLE :
DATE : DD-MM-YY
REFERENCE NUMBER :
AUTHOR :
ORGANIZATION :
OF AUTHOR :

INJECTION TEST ANALYSIS REPORT

TITLE :
DATE : DD-MM-YY
REFERENCE NUMBER :
AUTHOR :
ORGANIZATION :
OF AUTHOR :

INJECTION FLUID TREATMENT REPORT

TITLE :
DATE : DD-MM-YY
REFERENCE NUMBER :
AUTHOR :
ORGANIZATION :
OF AUTHOR :

1	DATE	10/10/99	TIME	08:30	WELL NO.	100-100	WELL NAME	100-100	WELL TYPE	100-100	WELL STATUS	100-100	WELL DEPTH	100-100	WELL DIRECTION	100-100	WELL ORIENTATION	100-100	WELL SURVEY	100-100	WELL SURVEY DATE	100-100	WELL SURVEY TIME	100-100	WELL SURVEY LOCATION	100-100	WELL SURVEY METHOD	100-100	WELL SURVEY INSTRUMENT	100-100	WELL SURVEY OPERATOR	100-100	WELL SURVEY COMMENTS	100-100	WELL SURVEY PAGE	100-100	
2	WELL TEST AND STIMULATION INFORMATION																																				
3	SURVEY DEPTH																																				
4	SOE	999.9	[M]																																		
5	SUBSEA DEPTH	999.9	[M]																																		
6	DATUM PLANE DEPTH	999.9	[M]																																		
7	SURVEYOR																																				
8	TEST RECORD																																				
9	SHUT-IN TIME	99.999.9	[HR]																																		
10	BOTTOMHOLE PRESSURE	9.999.9	[KG/CM2/10M]																																		
11	LIQUID LEVEL IN																																				
12	SUBSEA DEPTH	9.999.9	[M]																																		
13	AVERAGE PRESSURE GRADIENT FOR GAS COLUMN	9.999	[KG/CM2/10M]																																		
14	AVERAGE PRESSURE GRADIENT FOR LIQUID COLUMN	9.99	[KG/CM2/10M]																																		
15	WELL HEAD PRESSURE	999.9	[KG/CM2]																																		
16	TEST ANALYSIS RESULT																																				
17	PV	999.99	[KG/CM2]																																		
18	ELOW CAPACITY	999.999.99	[MILLIDARCY.M]																																		
19	PERMEABILITY	9.999.99	[MILLIDARCY]																																		
20	SKIN FACTOR	999.99																																			
21	DAMAGE RATIO	99.99																																			
22	PRODUCTIVITY INDEX																																				
23	IDEAL	999.99	[M3/D/KG/CM2]																																		
24	ACTUAL	999.99	[M3/D/KG/CM2]																																		
25	ELOW EFFICIENCY	9.999	[PERCENTION]																																		
26	QMAX	99.999.9	[M3/D]																																		
27	ABSOLUTE OPEN FLW																																				
28	POTENTIAL	99.999.9	[M.M3/D]																																		
29	PRESSURE ELEMENT																																				
30	DATE OF LAST CALIBRATION																																				
31	DATE OF LAST CALIBRATION	DD MM YYYY																																			
32	PRESSURE ELEMENT NUMBER	XXXXX																																			
33	TYPE OF PRESSURE ELEMENT	XXXXXX																																			

WELL TEST AND STIMULATION INFORMATION

TEST CODE : XXX-M001-PT-01-80

RING OF WELL TEST AND STIMULATION : XXXXXXXXXXXXXXXXXXXXXXXXXXXX

PROVINCE NAME : XXXXXXXXXX

AREA NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIELD OFFICE NAME : XXXXXXXXXX

FIELD OR PROSPECT NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXX

WELL NAME : XXX-XXXX

WORKOVER NUMBER : 99

STRING NAME : XXXXXXXXXXXXXXXXXXXXXXXX

RING OF COMPLETED ZONE : XXXXXXXXXXXXXXXX

WELL STATUS : XXX

FORMATION NAME : XXXXXXXXXXXXX

RESERVOIR UNIT CODE : XXX-XXX-XXX-XXXX-XXXX-XXXX

LAYER NAME : XXXXXXXXXXXXXXXXXXXXXXXXXXXX

TEST PERIOD : DD-MM-YYYY - DD-MM-YYYY

TEST INTERVAL : 9999.99 - 9999.99 (M)
 SURVEYOR : XXXXXXXXXXXXXXXXXXXXXXXX
 LOG IDENTIFICATION NUMBER : XXXXXXXX
 RUN NUMBER : XX
 KIND OF PRODUCTION LOG : XXXXXXXXXXXXXXXXXXXXXXXX
 REFERENCE REPORT : XXXXXXXXXXXXXXXXXXXXXXXX
 TITLE : XXXXXXXXXXXXXXXXXXXXXXXX
 DATE : 00 MM YY YY
 REFERENCE NUMBER : XXXXXXXXXXXX
 AUTHOR : XXXXXXXXXXXXXXXXXXXXXXXX
 ORGANIZATION OF AUTHOR : XXXXXXXXXXXXXXXXXXXXXXXX

TREATMENT_INTERVAL : 9999 9 9999 9 [M]
SERVICE_CONTRACTOR : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

OBJECTIVE_FOR_STIMULATION : XXXXXXXXXXXXXXXXXXXXXXXX
TYPE_OF_STIMULATION : XXXXXXXXXXXXXXXXXXXXXXXX

TREATMENT_FLUID
TYPE : XXXXXXXXXXXXXXXX
WALN_ACOLLIVES : XXXXXXXXXXXXXXXXXXXXXXXX
VOLUME : 999 99 [M3]

SUMMARY_OF_TREATMENT : XXXXXXXXXXXXXXXXXXXXXXXX
WELL_STIMULATION_REPORT

TITLE : XX
DATE : DD MM YYYY
REFERENCE_NUMBER : XXXXXXXXXXXX
AUTHOR : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
ORGANIZATION_OF_AUTHOR : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

1	FIELD LABORATORY FLUID ANALYSIS INFORMATION
2	ANALYSIS CODE
3	KIND OF ANALYSIS
4	PROVINCE NAME
5	AREA NAME
6	FIELD OFFICE NAME
7	FACILITIES FIELD NAME
8	STATION CODE
9	(In case of station.)
10	

FIELD LABORATORY FLUID ANALYSIS INFORMATION

(In case of GIL)

KIND OF SAMPLING PLACE : XXXXXXXXXXXXXXXXXXXX

SAMPLING DATE : DD MM YYYY

SAMPLING CONDITION

PRESSURE : 9.999.9 [KG/CM2]

TEMPERATURE : 999.9 [°C]

ANALYSIS DATE : DD MM YYYY

REFERENCE REPORT

TITLE

DATE

REFERENCE NUMBER

AUTHOR

ORGANIZATION OF AUTHOR

LOCATION OF LABORATORY : XXXXXXXXXXXXXXXXXXXX

API GRAVITY : 99.99 [°API]

POUR POINT : 99.99 [°C]

WATER AND SEDIMENT

WATER CONTENT : 999.99 [%]

FIELD LABORATORY FLUID ANALYSIS INFORMATION

PAGE 999

DD MM YY

(In case of condensate)

KIND OF SAMPLING PLACE XXXXXXXXXXXXXXXXXXXX

SAMPLING DATE DD MM YYYY

SAMPLING CONDITION

PRESSURE 999.9 (KG/CM2)

TEMPERATURE 999.9 (°C)

ANALYSIS DATE DD MM YYYY

REFERENCE REPORT

TITLE XXXXXXXXXXXXXXXXXXXX

DATE XXXXXXXXXXXXXXXX

REFERENCE NUMBER XXXXXXXXXXXXXXXX

AUTHOR XXXXXXXXXXXXXXXX

ORGANIZATION OF AUTHOR XXXXXXXXXXXXXXXX

LOCATION OF LABORATORY XXXXXXXXXXXXXXXXXXXX

API GRAVITY 99.99 (°API)

POUR POINT 99.99 (°C)

WATER AND SEDIMENT 999.99 (%)

WATER CONTENT 999.99 (%)

DD MM YY

FIELD LABORATORY FLUID ANALYSIS INFORMATION

(In case of gas)

KIND OF SAMPLING PLACE

SAMPLING DATE

SAMPLING CONDITION

PRESSURE TEMPERATURE

ANALYSIS DATE

REFERENCE REPORT

TITLE

DATE

REFERENCE NUMBER

AUTHOR

ORGANIZATION OF AUTHOR

LOCATION OF LABORATORY

SPECIFICATION GRAVITY

GAS COMPONENT

H2S

CO2

O2

N2

C1

C2

C3

C4

NCA

ICS

NCS

CG

OTHER COMPONENT

XXX

XXX

XXX

GROSS HEATING VALUE

NET HEATING VALUE

NET CALORIFIC VALUE

FIELD LABORATORY FLUID ANALYSIS INFORMATION

(In case of water)

KIND OF SAMPLING PLACE	XXXXXXXXXXXXXXXXXXXX
SAMPLING DATE	00 MM YYYY
SAMPLING CONDITION	
PRESSURE	9 999 9 [KG/CM2]
TEMPERATURE	999 9 [°C]
ANALYSIS DATE	00 MM YYYY
REFERENCE REPORT	
TITLE	XX
DATE	00 MM YYYY
REFERENCE NUMBER	XXXXXXXXXX
AUTHOR	XX
ORGANIZATION OF AUTHOR	XX
LOCATION OF LABORATORY	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
COMPONENT	
Na+	9 999 99 [MEQ/L]
K+	9 999 99 [MEQ/L]
Ca++	9 999 99 [MEQ/L]
Mg++	9 999 99 [MEQ/L]
BA++	9 999 99 [MEQ/L]
FE++	9 999 99 [MEQ/L]
CU-	9 999 99 [MEQ/L]
HCO3-	9 999 99 [MEQ/L]
SO4-	9 999 99 [MEQ/L]
CO3-	9 999 99 [MEQ/L]
SALINITY	999 999 [PPM]
RESISTIVITY	99 99 [OHM.M]
PH	999 99
SCALING INDEX	999 99
SUSPENDED SOLID	999 999 [PPM]
DISSOLVED SOLID	999 999 [PPM]

FIELD LABORATORY FLUID ANALYSIS INFORMATION

ANALYSIS CODE : XXX-XXX

KTNO OF ANALYSIS : XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX

PROVINCE NAME : XXXXX XXXXX

AREA NAME : XXXXX XXXXX XXXXX XXXXX XXXXX

FIELD OFFICE NAME : XXXXX XXXXX

FIELD OR PROSPECT NAME : XXXXX XXXXX XXXXX XXXXX XXXXX

WELL NAME : XXXX

WORKOVER NUMBER : 99

RESERVOIR UNIT CODE : XXXX , XXXX , XXXX , XXXX , XXXX , XXXX

LAYER NAME : XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX XXXXX

(In case of well)

KIND OF SAMPLING PLACE (In case of water)
 SAMPLING DATE DD MM YYYY
 SAMPLING CONDITION
 PRESSURE S.999.9 [KG/CM²]
 TEMPERATURE 999.9 [°C]
 ANALYSIS DATE DD MM YYYY
 REFERENCE REPORT
 TITLE
 DATE DD MM YYYY
 REFERENCE NUMBER
 AUTHOR
 ORGANIZATION OF AUTHOR
 LOCATION OF LABORATORY

COMPONENT	UNIT	VALUE	UNIT
Na+	[MEQ/L]	9.999.99	[MEQ/L]
K+	[MEQ/L]	9.999.99	[MEQ/L]
Ca++	[MEQ/L]	9.999.99	[MEQ/L]
Mg++	[MEQ/L]	9.999.99	[MEQ/L]
Fe++	[MEQ/L]	9.999.99	[MEQ/L]
Cu++	[MEQ/L]	9.999.99	[MEQ/L]
HCO ₃ ⁻	[MEQ/L]	9.999.99	[MEQ/L]
SO ₄ ⁻	[MEQ/L]	9.999.99	[MEQ/L]
CO ₃ ⁻	[MEQ/L]	9.999.99	[MEQ/L]
SALINITY	[PPM]	999.999	[PPM]

RESISTIVITY 99.99 [OHM.M]
 PH 999.99
 SOILING INDEX 999.99
 SUSPENDED SOLID 999.999 [PPM]
 DISSOLVED SOLID 999.999 [PPM]

FIELD LABORATORY FLUID ANALYSIS INFORMATION

ANALYSIS CODE XXX-XXX
KIND OF ANALYSIS XXXXXXXXXXXXXXXXXXXXXXXX

PROVINCE NAME XXXXXXXXXXXX

AREA NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX

FIELD OFFICE NAME XXXXXXXXXXXX

PACIFICARS FIELD NAME XXXXXXXXXXXXXXXXXXXXXXXX

STATION CODE XX

(In case of station)

