KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Form G-2 (Rev. 7/03)

		ONE	K/ Point St	ANSAS								v Tr	ST	A	Form G-2 (Rev. 7/03) RECE/V 7 0 7 200 WICHI Inber	
Type Test:		UNE	PUINI 31					verse Side)		ı v ⊆∩/	-DILII			OC	70-16	
	en Flow			•									K	(Ca	20)	
Deliverability			Test Date:				API No. 15 023-20572-00				000	•	.CC.	WICH.		
Company LOBO F	ROD	UCTION, IN	C.				Lease O'BRIE	ΞN								
County Location CHEYENNE S/2 SW SE			Section 35						RNG (E/W) 12 W			•	Acres At	tributed		
Field			Reservoir			Gas Gathering Connecti LOBO PRODUCTI					ection	INIC				
		EEK NIOBR	ARA	NIOBR Plug Back		onth				er Set a		HUN	, INC.			
Completio				1353'	i iolai D	ерит					•					
Casing Size Weight			,	Internal Diameter			Set at 1385'			Perforations 1262'			To 1310'			
4.5 Tubing Size	4.5 13.5#			Internal Diameter			1000			Perforations			To			
· ·		\$								l lait as	Travalina	Dhinac	r? Vac	/ No		
Type Com SINGLE		(Describe)	•	Type Fluid	Produc	tion			rump	Unit of	Traveling NO	r iunge		, 110		
Producing Thru (Annulus / Tubing)				% C	arbon D)	% N			litrogen			avity - G	9		
CASING				Pressure Taps					- Annual Control of the Control of t				.600 (Meter	Run) (Pr	over) Size	
Vertical D T.D. 13						.0334	apa						•	TER F		
		: Shut in8-1	10 20	04 at 8	:00	_ (AM) (PM)	Taken_8-	-13		20	04 at	8:00	(M) (PM)	
Pressure	•	Started 8-1:		04 at _8				Taken 8-	15		20	04 at	9:00	(AM) (PM)	
Well on L	ne:	Started														
					OBSE	RVED	SURFAC			Tubin	ıa	Duratio	on of Shut	- <u>in</u>	Hours	
Static / Orific		1 / Meter 1	Pressure Differential	Differential Temperature		Well Head Temperature		Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)			Liquid Produced (Barrels)	
Property	(inche	Proverrressu	ure in Inches H ₂ 0	ŧ	t		(P _w) or (I	psia	ļ	sig	psia					
Shut-In	.75	230					230	243.5				7	2		0	
Flow	.75	58	8	54	54		58	71.5				4	6		0	
L					FLOW	STRE	AM ATTI	RIBUTES								
Plate		Circle ane: Press		Gravity		Flowing Temperature			Deviation				W GOR (Cubic Feet		Flowing Fluid	
Coeffiecient (F _b) (F _p)		Mete or Prover Pressure	Extension P _m x h	Fac	tor :	Facto		tor F		R (Mcfd)		Barrel)		i (S/AVITV		
Mcfd		psia					F ₁₁	1.00	1.00		86.10		N/A		N/A	
3.60		71.5	23.92	1.00		1.0					0.10	l <u>-</u>			l	
$(P_c)^2 = _{-}^{5}$	ig 20	. (5.12	<u>5.11</u> :	•		ELIVE %		Y) CALCUL (P _c - 14.4) +			:			$()^2 = 0.2$ $()^2 =$		
(P _c)' =	1		Choose formula 1 or 2	P _d =		<u>— ~</u>	Backpr	ressure Curve	$\neg \neg$		<u>г</u> ¬			Oi	pen Flow	
$(P_c)^2 - (P_B)^2$ or		(P _c) ² - (P _w) ²	1. P _c ² · P _a ² 2. P _c ² · P _d ²	LOG of formula 1. or 2.			Slope = or-		" ^		LOG		Antilog		Deliverability Equals R x Antilog	
(P _c) ² - (P ₀) ²	i	divided by: $P_c^2 - P_w$	and divide	P _c ² -P	2		Assigned Indard Slope							(Mcfd)	
59.08		54.18	1.09	.038	.038		.850)			.032		1.076		92.68	
Open Flo	w 9:	2.68	Mcfd @ 14	.65 psia	<u> </u>		Delivera	ability				Mcfd	@ 14.65 p	sia		
		igned authority,			states ti	nat he	is duly	authorized	to ma	ke the	above rep	ort and	that he h	nas knov	vledge of	
		nerein, and that						_	day	ofO	СТОВЕ	R			20 04	
uie iacis	viatou (only and that							1.	. /	Var	di) !n.A			
		Witness	(if any)			_		-1100	w	v	Fo	r Company				
		For Com	mission			_		_/			Ch	ecked by	· · · · · · · · · · · · · · · · · · ·			
		rui con														

l declare under nen	alty of parium under the lowe of the etect	o of Kompon that I am authorized to warre
		e of Kansas that I am authorized to request
	e K.A.R. 82-3-304 on behalf of the operato	
		tained on this application form are true and
		ble production summaries and lease records
		se being made of the gas well herein named.
	ne-year exemption from open flow testing	for the O'BRIEN 4-35
gas well on the grounds	that said well:	Ĵ
(Ob to - in -)		
(Check one)		
	palbed methane producer	
	eled on plunger lift due to water	
——————————————————————————————————————	ource of natural gas for injection into an o	
	vacuum at the present time; KCC approva	
✓ is not	capable of producing at a daily rate in ex	cess of 250 mcf/D
I further agree to sup	oply to the best of my ability any and all s	upporting documents deemed by Commission
staff as necessary to con	roborate this claim for exemption from te	esting
•	to the state of th	oung.
Date: 10/01/04		
	Signature:	Larders PERATOR
	Title: OWNER/OI	PERATOR

Instructions:

If a gas well meets one of the eligibility criteria set out in KCC regulation K.A.R. 82-3-304, the operator may complete the statement provided above in order to claim exempt status for the gas well.

At some point during the current calendar year, wellhead shut-in pressure shall have been measured after a minimum of 24 hours shut-in/buildup time and shall be reported on the front side of this form under **OBSERVED SURFACE DATA**. Shut-in pressure shall thereafter be reported yearly in the same manner for so long as the gas well continues to meet the eligibility criterion or until the claim of eligibility for exemption **IS** denied.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than December 31 of the year for which it's intended to acquire exempt status for the subject well. The form must be signed and dated on the front side as though it was a verified report of annual test results.