KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	st; pen Flow		_	Tool Dat	(See Instruc	tions on Rev	erse Sid			i i i i i i	
De	eliverabilty	y		8/5	[#] 10				Pl No. 15 1 -20318-00-	00	
Compan Horsesh		rating, Inc.				Lease Poncin				1	Well Number
County Location Greeley C NE		on	Section 5	The second secon	TWP 19S		RNG (E 40W	፤/W)	() () () () () () () () () ()	Acres Attributed	
Field Bradsha	ıw			Reservoi Winfield					thering Conn Midstream	ection	
Completi 5-21-19				Plug Bac 2953	k Total Dep	th	to more than except at descript being the bown	Packer None	Set at		the state of the s
Casing S 4.5	Size	Weigh 10.5		Internal I 4.052	Diameter	Set at 2990		Perf 290	orations)2	то 2936	
Tubing S 2.375	ize	Weigh 4.7	Ì	Internal (2.000	Diameter	Set at 2875		Perf	orations	То	-
Type Cor Single		Describe)		Type Flui Water	d Production	n			Init or Traveling Unit - Rod		/ No
Producing		nnulus / Tubing)	% C	Carbon Dioxi	de		% Nitro			avity - G _g
Vertical D	Depth(H)				Pres Flan	sure Taps ae				(Meter	Run) (Prover) Size
Pressure	Buildup:	Shut in	8/4 2	0/0 at_3	3:00	(AM) (AM)	Taken	8/3	5 20	10 at 3:00	2(AM)(PM)
Well on L	ine:					_		,		at	_
		1		Ti's 40.	OBSERVE	D SURFACE	DATA			Duration of Shut-	in_24_Hours
Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Casir Wellhead P (P _w) or (P ₁)	ressure	Wellh	Tubing ead Pressure or (P _t) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In	.750)					43	Ferg	, po.u	24	
Flow											
	 1				FLOW STR	EAM ATTRIE	BUTES				
Plate Coeffied (F _b) (F Mcfd	ient	Circle one: Meter or Prover Pressure psia	Press Extension P _m xh	Grav Fact	· 1 7	Flowing emperature Factor F _{II}	Fa	iation ctor : pv	Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)	Flowing Fluid Gravity G _m
				_]							
(D.)2		(D.)3				ERABILITY)					= 0.207
(P _c) ² =	 .	(P _w) ² =_	Choose formula 1 or 2	P _d =		1	- 14.4) +	14.4 =	<u> </u>	(P _d)	=
(P _c) ² - (F or (P _c) ² - (F	P _d) ²	(P _c) ² - (P _w) ²	1. P _c ² - P _a ² 2. P _c ² - P _d ² ivided by: P _c ² - P _w ²	LOG of formula 1. or 2.	P _c ² -P _w ²	Backpress Slope c Assig Standar	:= "n" or gned	n x	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
					-						
Open Flov	l	<u>l_</u>	Mcfd @ 14.	65 neia		Deliverabili				Maid @ 14.05	
		ed authority on			tates that he		<u> </u>	maka th		Mcfd @ 14.65 psidert and that he has	
		ein, and that sa					11	day of	Octobe	V	, 20 <u>/0</u> .
		Witness (if	any)				_Qa	nicl	Ripl	LLY RE	CEIVED -
		For Commi					<i>U</i>		<u> </u>	ked by	T 1 4 2010
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I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Horseshoe Operating, Inc. and that the foregoing pressure information and statements contained on this application form are true and correct to the best of my knowledge and belief based upon available production summaries and lease records of equipment installation and/or upon type of completion or upon use being made of the gas well herein named. I hereby request a one-year exemption from open flow testing for the Poncin 1 gas well on the grounds that said well:
is a coalbed methane producer is cycled on plunger lift due to water is a source of natural gas for injection into an oil reservoir undergoing ER is on vacuum at the present time; KCC approval Docket No is not capable of producing at a daily rate in excess of 250 mcf/D
I further agree to supply to the best of my ability any and all supporting documents deemed by Commission staff as necessary to corroborate this claim for exemption from testing.
Date: 10/11/10 Signature: Janua Riply Title: Production Assistant

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.