## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	: en Flow	O.	_ •		,		tructi	ons on Re	verse Side	•					
<b>√</b> De	liverabil	ty			Test Date 07/01/10					AP	181-2030	3-000	00		
Company LOBO I		UCTION,	INC.					Lease TURN	OUR				,	Well Nu 1-4	
County Location SHERMAN NE NW SE			SE	Section 4			_		RNG (E	:/W)		Acres Attributed			
Field GOODI	LAND	GAS FIEI	_D		Reservoir NIOBR						thering Conn		i, INC.		
Completic 11/11/ (					Plug Bac 1115'	k Total [	Depth	1		Packer	Set at				
Casing Size Weight 4.5 15#			Internal Diameter			Set at 1140'		Perf 963	orations 3'		то 998'				
Tubing Si	ubing Size Weight			Internal Diameter			Set at		Perf	orations		То			
Type Con		(Describe)			Type Flui	d Produ	ction			Pump L	Init or Traveling NO	Plung	er? Yes	/ No	
Producing CASIN	,	Annulus / Tu	oing)		% C	arbon D	loxid	le		% Nitro	gen		Gas Gr	avity - (	3°
Vertical D	, , ,			······································		F	ress	ure Taps					(Meter F 2" ME		rover) Size RUN
Pressure	Buildup	: Shut in _	7/01	2	0_10_at_0	4:10	—.: :	AMI (PM)	Taken 07	7/02	20	10 a	04:15	~~~	PM
Well on L	ine:	Started		20	0 at			(AM) (PM)	Taken		20				(AM) (PM)
						OBSE	RVE	SURFAC	E DATA			Durati	on of Shut-	<sub>In</sub> 24.	.08 Hours
Static / Dynamic Property	Orific Size (inche	Prover Pre	r essure	Pressure Differential in Inches H <sub>2</sub> 0	Flowing Temperature t	Well He Tempera t		Wellhead	Pressure	1	Tubing ead Pressure or (P <sub>t</sub> ) or (P <sub>c</sub> ) psia	l	oration Hours)	1 .	d Produced Barrels)
Shut-In			ŕ	2				19	psia	pag	pola				
Flow					10. 10								<del> </del>		
<del></del>	1	Circle one:	-	•	<u> </u>	FLOW	STRI	EAM ATTR	HBUTES		T				
Plate Coeffiec (F <sub>b</sub> ) (F Mcfd	ient p)	Meter or Prover Pressure psia		Press Extension P <sub>m</sub> x h	Grav Fact	tor Te		Flowing Deviate Factor For Port Port Port Port Port Port Port Po		ctor	or R		GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G <sub>m</sub>
P <sub>c</sub> ) <sup>2</sup> =		: (P <sub>w</sub> ;	1 <sup>2</sup> =	•	(OPEN FLO		LIVE		') CALCUL P <sub>c</sub> - 14.4) +		•		(P <sub>a</sub> ) (P <sub>d</sub> )	<sup>2</sup> = 0.2	:07
(P <sub>c</sub> ) <sup>2</sup> - (I or (P <sub>c</sub> ) <sup>2</sup> - (I	P <sub>e</sub> ) <sup>2</sup>	(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Cho	ose formula 1 or 2  1. P <sub>c</sub> <sup>2</sup> - P <sub>s</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> ded by: P <sub>c</sub> <sup>2</sup> - P <sub>s</sub> <sup>2</sup>	LOG of tormula 1. or 2. and divide	P <sub>c</sub> <sup>2</sup> -P <sub>w</sub>		Backpre Slo 	essure Curve pe = "n" - or ssigned lard Slope	, n x	LOG	,	Antilog	Or Del Equals	pen Flow liverability BR x Antilog (Mcfd)
				- c w											
											****				
Open Flo	w			Mcfd @ 14.	65 psia			Deliverat	oility			Mcfd (	9 14.65 psi	ia	
	_	ned authority erein, and tha	-					•		$\sim$	the above repo	ort and	that he ha		ledge of 20, 10
							_		1/34	h	m	A	. D.	20	lla
		Witne	ss (if an	y)			_	•			For	Company			
		For C	ommissio	on n			_	-			Che	cked by			RECE

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exempt and tha	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator LOBO PRODUCTION, INC. It the foregoing pressure information and statements contained on this application form are true an
of equip	o the best of my knowledge and belief based upon available production summaries and lease record ment installation and/or upon type of completion or upon use being made of the gas well herein named reby request a one-year exemption from open flow testing for theTURNOUR_1-4
	on the grounds that said well:
. I fu	(Check one)  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  ther agree to supply to the best of my ability any and all supporting documents deemed by Commis
staff as	necessary to corroborate this claim for exemption from testing.
Date: <u>(</u>	8/23/10
	Signature: Siehan a. miller
	Title: OWNER/OPERATOR

## 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.