Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test:	:					(See Instru	ctions on Rev	erse Side,)					
Open Flow					Test Date:				API No. 15 -					
Deliverabilty					Test Date:				181-20040-00.00					
Company							Lease		<u>``</u>	<u> </u>		Well Nu		
Company		oducti	on.	Inc.			Glasc	o 1-6	•				· · · · · · · · · · · · · · · · · · ·	
Lobo Production, Inc. County Location			Section		TWP		RNG (E/W)		•	Acres A	Attributed			
Sherman C SE/4			6		<u>8S</u>		38W							
Field				Reservoir	•				ering Conne	ction	:			
Goodland				Niobra		 			.N					
Completio	n Date				-	k Total Dep	th		Packer S	et at				
11-7-78					951 <u>'</u>	0-4		Podos	ations	То				
Casing Size Weight			Internal C	nameter		Set at 910 '								
4.5				leternal C	liameter		Set at		Open Hole Perforations					
Tubing Siz	ze	Weight		Internal Diameter		Jet at	Set at .							
Type Com	plotion	(Describe)			Type Flui	d Productio	<u></u>		Pump Un	it or Traveling	Plunger? Yes	/ No		
• •					1,700 1 10.		•••		•					
Sing			ibina)		% Carbor		% Nitrogen			Gas Gravity - G				
Producing Thru (Annulus / Tubing) Casing				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						0.0	0.600			
Vertical De						Press	sure Taps				(Meter	Run) (R	XXXXX Size	
7011102110	- P(,											2"	Meter_Ru	
					-00	2 00			11/1	1 418	00 at 8:00		(AM) (PM)	
Pressure I	Buildup:			31								`	(2111)	
Well on Li	ne:	Started .		19)at		_ (AM) (PM)	(AM) (PM) Taken		19 at			(AM) (PM)	
						<u> </u>								
						OBSERV	ED SURFACE	DATA			Duration of Shut	l-in	Hours	
21-1-1	Orition	Circle one: Pressure		Pressure	Flowing Well H		Casing		Tubing		D. carting	Lieu	Liquid Produced	
Static / Dynamic	Orifice Size	Met	<i>er</i> or	Differential	Temperature	Temperature	Wellhead		Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)		(Barrels)	
Property	inches	\ Prover Pres		in (h) Inches H ₂ 0	t	t	psig			psia	1			
				1				, , , , , , , , , , , , , , , , , , ,				\top		
Shut-In							19		ļ		 	 		
Flow										1				
						EI OW ST	REAM ATTRI	BUTES						
			—т		T	1201101		1					Flowing	
Plate		Circle one:		Press Extension	Gravity		Temperature		viation Metered Flow		w GOR (Cubic F		Fluid	
Coeffiecient (F _b) (F _p)		Meter of Prover Pressure			Fac		Factor	1	ctor R (Mcfd)		Barrel		Gravity	
Mofd	'	psia		√ P _m x H _w	F		F _i ,		pv	············		<u> </u>	G _m	
									ATIONS	-				
						OW) (DELI	VERABILITY)					$)^2 = 0.2$	207	
(P _c) ² =		: (F	(w)2 =	:_	P _d =		_% (P	_c - 14.4) +	14.4 =	·	(F _d	,) ² =		
(D \2 - (D \2		(P _c) ² - (P _w) ²		oose formula 1 or 2.	LOG of	Γ		Backpressure Curve Slope = "n"		[]	•		Open Flow	
(P _c) ² - (P _a) ² or		(F _c) (F _w)-			formula 1. or 2.		Or		n x LOG		Antilog	1	Deliverability Equals R x Antilog	
$(P_c)^2 \cdot (P_d)^2$				2. P _c ² P _d ²	and divide	P _c ² · P _w ²	Assigned Standard Slope					-,	Metd	
			divi	ded by: P _c ² - P _w ²	- 69.	<u> </u>	0.0					+		
														
-4		***									:		1	
					<u> </u>									
Open Flow	,			Mcfd @ 14.6	5 psia		Deliverabil	ity			Mcfd @ 14.65 ps	ia		
T E		المحادية المحاد		half of the C	ompany etc	toe that he	is duly suther	ized to ma	ake the ah	ove report an	d that he has kno	wiedge /	of the facts	
						FCCIVE	.n							
stated there	ein, and	that said re	port is t	true and corre	39'ATEXPHI	ANT MARKET	OMMISSION	2_ day o	Dece	mber			1¥ <u>00</u>	
				•		SHALLON (NINIOOIININO		A	ton 1	er-			
		1AC	iness (if ar	nv)	ीं=	Ü 19 8) 	10	JUS	For	Company			
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		Fo	r Commiss	sion	CONGE	RVATION D	IVICION!			Che	ecked by		*****	
					Wi	chita, Kans	iviololy Sas							

l ded	clare under penalty or perjury under the laws of the state of Kansas that I am authorized to request
and that the best tion and, I her	the foregoing information and statements contained on this application form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and belief based upon gas production records and records of equipment installator of type completion or upon use of the gas well herein named. The production form are true and correct to of my knowledge and records of equipment installator of type completion or upon use of the gas well herein named.
	(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. X is incapable of producing at a daily rate in excess of 150 mcf/D
Date:	Signature:

Instructions:

All active gas wells must have at least an original G-2 form on file with the conservation division. If a gas well meets 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 obtain a testing exemption.

At some point during the succeeding calendar year, wellhead shut-in pressure shall be 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.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than thirty (30) days after the taking of the pressure reading. The form must be signed and dated on the front side as though it was a verified report of test results.