Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	t:			(See Instruc	tions on Rev	erse Side)				
\equiv	oen Flow eliverabil			Test Date 08/06/20					No. 15 71-20766-(0000		
Company Key Pro		Company				Lease Burgardt	•			No. 2	Well Number	
County Greeley		Locatio C, SE, N		Section 34		TWP 17S		RNG (E/V 40W	V)		Acres Attributed	
Field Byerly				Reservoir Chase	•			Gas Gath DCP Mid	ering Conn dstream	ection		
Completi 10/23/20				Plug Bac 3088	k Total Dep	th		Packer Se N/A	et at			
Casing S 5 1/2"	Size	Weight 14		Internal C	Diameter	Set at 3081.5		Perforations 2875		то 2922		
Tubing S 2 3/8"	ize	Weight 4.7		Internal [Diameter	Set at 2947		Perfora	ations	То		
Single	,	(Describe)		Type Flui Salt W	d Productio ater	n .		Pump Uni Pumpir		Plunger? Yes		
Producing Annulus	-	Annulus / Tubing)		% C	arbon Dioxi	ide		% Nitroge	n	Gas G	ravity - G _g	
Vertical D	Depth(H)				Pres	sure Taps				(Meter	Run) (Prover) Size	
Pressure	Buildup	Shut in08/0	5 2	0_10_at_1	0:00	(AM) (PM)	Taken_08	3/06	20	10 at 10:00	(AM) (PM)	
Well on L	ine:			0 at		(AM) (PM)	Taken		20	at	(AM) (PM)	
					OBSERVE	D SURFACE	DATA			Duration of Shut	-in <u>24</u> Hours	
Static / Dynamic Property	Orific Size (inche	Heter Differential Prover Pressure in		Flowing Temperature t Well Head Temperature t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In						17						
Flow												
					FLOW STF	REAM ATTRII	BUTES				1	
Plate Coeffiec (F _b) (F Mcfd	cient ,)	Circle one: Meter or Prover Pressure psia Press Extension ✓ P _m x h		Gravity Factor F ₀		Temperature Fac		iation ctor	Metered Flow R (Mcfd)	v GOR (Cubic F Barrel	eet/ Fluid	
P _c)² =		: (P _w) ² =_	:	(OPEN FLO		/ERABILITY) % (P _e	CALCUL - 14.4) +		:	-) ² = 0.207) ² =	
(P _c) ² - (l or (P _c) ² - (l	-	(P _c) ² - (P _w) ²	hoose formula 1 or 2: 1. $P_o^2 - P_a^2$ 2. $P_c^2 - P_d^2$ vided by: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide	P _c ² - P _w ²	Slope Assi	sure Curve e = "n" or igned rd Slope	n x Lo	og [Antilog	Open Flow- Deliverability Equals R x Antilog (Mcfd)	
											RECE	
			Na-64 @ 4 4	05 ani-		Dolling rate	lière			Mcfd @ 14.65 ps	NOV 2	
FI-		ned authority, on	Mcfd @ 14.	-	tates that h	Deliverabil		o make the		<u>-</u>	as knov ketg(o fW	
	undersid		-					h1-	vember		, 20 10	
The		erein, and that sai	d report is true	and correc	t. Executed	this the 24	•	day of No	A	1	, 20	
				and correc	t. Executed	I this the 24	Key	day of No	odkit	Lon Company	<u>.</u>	

I declare under penalty of p	perjury under the laws of the state of Kansas that I am authorized to request
·	82-3-304 on behalf of the operator Key Production Company
	information and statements contained on this application form are true and
correct to the best of my knowled	dge and belief based upon available production summaries and lease records
• •	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 Burgardt No. 2
gas well on the grounds that said	d well:
(Check one)	
	methane producer
	olunger lift due to water
·	f natural gas for injection into an oil reservoir undergoing ER
is on vacuum	at the present time; KCC approval Docket No
	e of producing at a daily rate in excess of 250 mcf/D
I further agree to supply to t	he best of my ability any and all supporting documents deemed by Commission
3	
	e this claim for exemption from testing.
	e this claim for exemption from testing.
staff as necessary to corroborat	e this claim for exemption from testing.
staff as necessary to corroborat	e this claim for exemption from testing.
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staff as necessary to corroborat	e this claim for exemption from testing.
	MA A A RECEIVE
staff as necessary to corroborat	Signature: Administrative Assistant RECEIVE NOV 2 9 2

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.