KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Te	st:				(See Ins	tructions on R	everse Side	9)		·	•	
	pen Flow				•							
	eliverabilty			Test D	ale:			APII	No. 15	25-205	26-00	-00
Compar		r Franc	is Oil C	ompany		Lease K 1	inger				Well Number	
County			cation	Section	n	TWP	TILE CT	RNG (E/	W)		Acres Attribut	
Ċ1	ark		,	11		348	·	25W		•	70163 7tt1100t	,eu
ield		······································		Resen	roir ,				ering Conne	ction		
	McKinn	ey		(hester	-			Dne0			
	ion Date				ack Total D			Packer Se		<u> </u>		
101	120/81					767		,	Non	. ·		
asing		We	ight	Interna	l Diameter		at	Perfor		То	· · · · · · · · · · · · · · · · · · ·	
.5		1	0.5	ı	1.000	592	27			/	5560	
ubing S	Size		ight		l Diameter	Set		Perfor		To		
2.3	375		4.7	1.	995	54	777					
pe Co	mpletion (D		1		uid Produc			Pump Uni	t or Traveling	Plunger? Yes	/No	
Sii	rale							• •		,		
		nulus / Tubi	ng)	% Cart	on Dioxide		"	% Nitroge	n	Gas G	ravity - G	
ıb'in	g							- 🍑 🖰			, - ;	
rtical [Depth(H)				Pre	ssure Taps		· · ·		(Meter	Run) (Prover) :	Size
	49					Pipe				IMPIGE	LIGHT (FICTOR)	J126
			2/211/1.			1 PE		-11				
essure	Buildup:	Shut in	<u> </u>	1.9 at,_	• • • • • •	(AM) (PM)	Taken	3/25/1	0 19	at	(AM) (F	PM):
ell on L	ine:	Started		19 at		(AM) (PM)	Taken	, ,	10	at		
	<u> </u>					— (SIM) (CIM)	Taken		19	at	(AM) (F	-M)
					OBSER	VED SURFAC	F DATA			Duration of Shut		
		Circle one	Pressu	re	1	Car	sing	T.	bing Í	Duration of Shut	-ın	Hours
atic / namic	Orifice:	Meter o		tial Flowing		Wollboad	Pressure	1	oing J Pressure	Duration	Liquid Produ	rceq:
perty	inches	Prover Pres			re: Temperati t		P _t) or (P _c):	1	P,) or (Pc)	(Hours)	(Barrels)	
		psig	Inches h	1,0		psig	psia	psig	psia			
ut-In		1	j .					100		24		
ow					† -	•		100				
		<u> </u>			<u> </u>							
					FLOW S	TREAM ATTR	IBUTES	•				
Plate		Circle one:	Press			Flowing					Flow	vina
oeffieci		Meter or	ter or Extension		Gravity 1		Temperature Fa		Metered Flow	GOR (Cubic Fe		-
(F _a) (F _i Mcfd	9' !	over Pressure psia	V P,x I	₹	F	Factor	F	av	(Mcfd)	Barrel)	Grav	
- IVICIO	· · · ·		-}	* !		F,,					G	•
				į.	ŀ	, "	-					
		······································		/ODEN E	040 (05)	W5040H (201			*******	k		لـــــا
_						IVERABILITY	•			(P ₃)	$^2 = 0.207$	
<u> </u>	:_	(P _#)²		: P _a :	<u> </u>	_% (F	² _c - 14.4) +	14.4 =	:	(P ₄)	2 =	
P _e)2 - (F) 2 (0)²-(P_)²	Choose formula 1	*			ssure Curve		rı		Open Flow	
or	* 1	٠٠٠ (٣٠٠)	ŀ	Siumo!		Sion	06 ≈ "N"	n x LO	G	Antilog	Deliverabilit	
?) ? • (F)2 		2. P _a 2 P _a	and divid	P. 2. P. 2		signed			- Citalog	Equals R x An	itilog
	_		divided by: P.2.	P ₂ oy:	<u> </u>	Standa	ard Slope		ن نا		Mcfd	
				ľ				-	i:		<u>'</u>	
				<u> </u>						· · · · · · · · · · · · · · · · · · ·		
			Mcfd @ 1	4.65 psia		Deliverabil	ity		М	cfd @ 14.65 psia		
n Flow	<i>t</i> ·							• • •				
n Flow						is duly author	ized to mak	the above	e report and	that he has know	ledge of the fa	ıcts
		authority, o	n behalf of the	Company, st	ates that he	_			4	•		
The u	ndersigned					18	*		ember	•	-a2n	10
The u	ndersigned			orrect. Execut		_	day of		ember	•	RECEI	VET
The u	ndersigned					_	*		Ma	io	RÉCEI	VEL
The u	ndersigned		t is true and c			_	*		Ma	IOV Impany	RECEI	VEL 2 20

I declare under penalty or perjury under	the laws of the state of	f Kansas that I am	authorized to r	equest
exempt status under Rule K.A.R. 82-3-304 on				
and that the foregoing information and states			re true and co	rrect to
the best of my knowledge and belief based t		;		
ion and/or of type completion or upon use o	of the gas well herein na	amed.		
I hereby request a permanent exemption f			1-11	
gas well on the grounds that said well:			•	
(Check one)			* •	
is a coalbed methane pro				
is cycled on plunger lift du				
is a source of natural gas			ng ER	
is on vacuum at the prese	•		Name of the last	
x is incapable of producing	at a daily rate in exces	s of 150 mcf/D 1.	The second secon	and the
	And the second of	·*		e ,
		•		
• •		•		. 6 4
1			*	
Date:			en e e e e e e e e e e e e e e e e e e	
Date:			en e e e e e e e e e e e e e e e e e e	
Date:			erin erin erin erin erin erin erin erin	
Date:			erin yerin yerin da karan da k Karan da karan da ka	en e
Date:			ere e e e e e e e e e e e e e e e e e e	en e
Date:		1 m.		
	gnature: <i>Rober</i>	t Maja		
		A Major on Records Mana	ıger	en e
	••	on Records Mana	ger	

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.