Form G-2
(Rev. 7/03)

Kansas Corporation Commission
One Point Stabilized Open Flow or Deliverability Test

(See Instructions on Reverse Side)

Type Test:
☐ Open Flow
☐ Deliverability

Test Date: **08/05/2010** API No. **15175215480000**

Company	Lease	Well Number
OXY USA Inc	**MCFADDEN B 1**	

County	Location	Section	TWP	RNG (E/W)	Acres Attributed
Seward	**1085 FNL & 1155 FWL**	**23**	**31S**	**34W**	**640**

Field	Reservoir	Gas Gathering Connection
UNASSIGNED TO FIE	**Morrow**	**ONEOK FIELD SERVICES**

Completion Date	Plug Back Total Depth	Packer Set at
07/10/1996	**5,750'**	

Casing Size	Weight	Internal Diameter	Set at	Perforations	To
5 1/2"	**14.0#**	**5.012"**	**5,794'**	**5,362'**	**5,374'**

Tubing Size	Weight	Internal Diameter	Set at	Perforations	To
2 3/8"	**4.7#**	**1.995"**	**5,435'**		

Type Completion (Describe)	Type Fluid Production	Pump Unit or Traveling Plunger? Yes / No
SINGLE-GAS	**WATER**	**Yes - Beam Pump**

Producing Thru (Annulus / Tubing)	% Carbon Dioxide	% Nitrogen	Gas Gravity - Gg
Annulus	**0.893%**	**1.526%**	**1.663**

Vertical Depth (H)	Pressure Taps	(Meter Run) (Prover) Size
5,368'	**Flange**	**2.067"**

Pressure Buildup: Shut in **08/04** 20 **10** at **9:00** Taken **08/05** 20 **10** at **9:00**

Well on Line: Shut in _____ 20 _____ at _____ Taken _____ 20 _____ at _____

OBSERVED SURFACE DATA Duration of Shut-in **24** Hours

Static / Dynamic Property	Orifice Size (inches)	*Circle one: Meter Prover Pressure* psig (Pm)	Pressure Differential in Inches H_2O	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P_w) or (P_t) or (P_c) psig	Casing Wellhead Pressure psia	Tubing Wellhead Pressure (P_w) or (P_t) or (P_c) psig	Tubing Wellhead Pressure psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In						**0.5**	**14.9**	**0.0**	**0.0**	**24**	
Flow											

FLOW STREAM ATTRIBUTES

Plate Coefficient (F_b) (F_p) Mcfd	*Circle one: Meter or Prover Pressure* psia	Press Extension P_m x h	Gravity Factor F_g	Flowing Temperature Factor F_{ft}	Deviation Factor F_{pv}	Metered Flow R (Mcfd)	GOR (Cubic Feet/Barrel)	Flowing Fluid Gravity G_m

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

$(P_c)^2$ = 0.2 : $(P_w)^2$ = 0.0 : P_d = _____ % $(P_c - 14.4) + 14.4$ = _____ : $(P_a)^2$ = 0.207 $(P_d)^2$ = 0

$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$	$(P_c)^2 - (P_w)^2$	Choose Formula 1 or 2: 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. *and divide by:*	$P_c^2 - P_w^2$	Backpressure Curve Slope = "n" —or— Assigned Standard Slope	n x LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)

Open Flow 0 Mcfd @ 14.65 psia Deliverability Mcfd @ 14.65 psia

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the **27** day of **December**, **2010**.

Witness

OXY USA Inc.
For Company

For Commission

Tom Acton Oxy USA Inc.

RECEIVED
DEC 30 2010
KCC WICHITA

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(Rev. 7/03)

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 **OXY USA 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 **MCFADDEN B 1** for the gas well on the grounds that said well:

(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 a 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: **December 27, 2010**

Signature: Tom Acton OXY USA Inc

Title: Gas Flow Coordinator

Instructions: If a gas well meets one of the eligibility criteria set out in the 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 31st 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.