KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				•	See Instruc	tions on Heve	erse Side	<i>,</i>					
=	en Flo liverat				Test Date	" /	•		API 15-	No. 15 071-20154	0000			
Company	/ hoe :	One	erating, In		1.10-1		Lease Vester			071-2010-	1	Well Nur	nber	
County, Greeley			Local N/2 N	ilon	Section 11		TWP 17S		RNG (E/W) 40W			Acres Attributed 640		
Field Bradshaw				<u>-</u>	Reservoir Chase				Gas Gathering Connection DCP Midstream					
Completion Date					Plug Back Total Depth					et at	<u>*</u>			
12/1977 Casing Size			Weigi	ht	2995 Internal I	Diameter		Set at 3001		None Perforations		To		
4.5 Tubing Si	ize		10.5 Weigi	ht	4.04 Internal Dia		meter Set at		2952 Perforations		2976 To			
2.375 Type Completion (Describ			4.7		1.995	1.995 2927 Type Fluid Production			Pumo Un	it or Traveling	Plunger? Yes	nger? Yes / No		
Single Gas Producing Thru (Annulus / Ti				Water					Yes % Nitrogen Gas Gravity - G					
Annulus	3		TUIUS / TUDIN	(9)	76 C	arbon Ulox			76 14MOQ			_	.	
Vertical D	epth(l	1)		•		Pres	ssure Taps				(Meter	Run) (Pro	over) Size	
Pressure	Buildu	p: :	Shut in	1-12	20 <u>//</u> at	9:00	(AM)(PM) 1	aken	1-1	320	// at 9:0	00 (M)(PM)	
Well on L	lne:		Started		20 at		(AM) (PM)	Taken		20	at	(/	- AM) (PM)	
					_	OBSERVE	ED SURFACE	DATA			Duration of Shut	-in_2	Hours	
Static / Oynamic Property	Dynamic Size		Circle one: Meter Prover Press psig (Pm)		Flowing Temperature t	. Well Head Temperature t	(P _w) or (P ₄) or (P ₅)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _a)		Ouration (Hours)			
Shut-In	.60	35	P=# (1)	William Tigo	 	<u> -</u>	psig	96	psig	psia	24	†	 _	
Flow														
				T	<u> </u>	FLOW ST	REAM ATTRU	UTES			1	 -J		
Plate Coefficient (F _p) (F _p) Mcfd		Gittle one; Mater or Prover Pressure psia		Press Extension P _m x h	Extension Fact		or Temperature		lation actor	Metered Flor R (Mcfd)	W GOR (Cubic F Barrel	oev	Flowing Fluid Gravity G _n	
 .			 		<u> </u>			<u> </u>						
(P _g) ² =		_:	(P _w)² =	·:	(OPEN FL	OW) (DELI\	VERABILITY) .% (P.	CALCUL - 14.4) +		:) ² = 0.20)7 	
(P _e) ² - (F)2 (F		',)² · (P_,)²	Choose formula 1 or 2: 1. P. 2 - P. 2 2. P. 2 - P. 2 andded by: P. 2 - P. 2	LOG of formula 1, or 2, and divide	P.2. P.2	Backpressure C Slope = "n"		n x l	LOG [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
									_					
Open Flov	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Mcfd @ 14	.65 psla		Deliverabi	lity			Mcfd @ 14.65 ps	sla		
The L	ınders	lgned	d authority, c	n behalf of the	Company, s	states that	he is duly au	horized i	to make th	above repo	ort and that he h	as knowl	edge of	
he facts st	ated t	herei	n, and that s	aid report is tru	e and correc	t. Executed	d this the		day of MICL	Pi	rlu-	, 2	20	
			Witness	(i eny)			-	Ju			Сотралу	REC	EIVED	
			For Com	nission			_			Che	ocked by		2 201	

KCC WICHITA

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 Horseshoe Operating, 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 testing for the Vester 1
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 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: <u>5/9///</u>
Signature: <u>Janice Ripley</u> Title: <u>Production</u> Assistant

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.