## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

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= :	en Flow liverabilty			Test Date				API	No. 15 5- <b>24</b> 152-00		•		
Company	<u> </u>			3-3-	71	Lease	<del></del>				Well Numb	ber	
County	noe Op	erating, Inc		Section		Doyle		RNG (E	/A/\	· 1	Acres Attr	dhuted	
County Location Hamilton C SW		21		238		41W		640					
Fleid Bradsha	aw	٠	•	Reservoir Chase	•				hering Conne <b>Field Sen</b>		D. (1)		
Completion Date 8/12/76		Plug Bac 2503	k Total Dept	th		Packer Set at			RECEIV				
Casing Si 4.5	asing Size Weight		Internal Diameter 4.052		Set at <b>2523</b>		Perforations 2448		то МАУ 2 7 2458		7 201		
Tubing Si.	ubing Size Weight		Internal Diameter 1.995		Set at <b>2456</b>		Perforations		To KCC WICHI		/ICHIT		
Type Com Single -					d Production		<del>-</del>	Pump Ur	nit or Traveling				
_	Thru (An	ınulus / Tubin	g)		arbon Dloxi	de		% Nitrog	en	Gas Gi	avity - G		
Vertical D	ANS epth(H)	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		sure Taps				(Meter	Run) (Prov	ren Size	
			3-2 20	// at /		inge	Talana	2-:	3 00	// at //:5	<del>2</del> 0 6	M) (PM)	
Pressure I	•									at		•	
Well on Li	ne:	Started	20	et		(AM) (PM)	Taken	· · · · · · · · · · · · · · · · · · ·	20	at	(AN	/i) (PM)	
		T			OBSERVE	D SURFAC			T	Duration of Shut-	<u> , 24</u>	LHours	
Static / Dynamic	Size Meter		Pressure Differential .	fferential Temperature Te		Well Head Temperature  Casing Wellhead Pres (P_) or (P_1) or				Duration (Hours)		Liquid Produced (Barrels)	
Property	(inches)	psig (Pm)	Inches H <sub>2</sub> 0	t	t	psig	psia	psig	psla	211	<u> </u>		
Shut-In Flow	.629	7					<i>5</i> 9		-	24	+		
PIOW			<u> </u>		ELOW STD	EAM ATTR	IBIITES		1				
Plate Coefficie (F <sub>b</sub> ) (F <sub>p</sub> Mcfd	ent	Circle one: Meter or over Pressure pain	Press Extension '✓ P <sub>m</sub> x h	Grav Fact F	rity 1	Flowing Temperature Factor F <sub>t1</sub>	Dev Fa	iation ector	Metered Flow Fl (Mcfd)	GOR (Cubic Fe Barrel)	ret/	Flowing Fluid Gravity G <sub>m</sub>	
			<u>l</u>	(OPEN FL	OW) (DELIV					(P <sub>s</sub> )	r <sup>2</sup> = 0.207	<b>.</b>	
(P <sub>e</sub> )² =	<del></del> :	(P <sub>w</sub> ) <sup>2</sup> =	Choose formula 1 or 2:	P <sub>d</sub> =		<del></del>	P <sub>e</sub> - 14.4) +		: :	(P <sub>d</sub> )	<del>} =</del>		
(P <sub>a</sub> ) <sup>2</sup> - (P or (P <sub>a</sub> ) <sup>2</sup> - (P	_	P <sub>a</sub> )2- (P <sub>a</sub> )2	1. P. <sup>2</sup> ·P. <sup>2</sup> 2. P. <sup>2</sup> ·P. <sup>2</sup> shided by: P. <sup>2</sup> ·P. <sup>2</sup>	LOG of formuta 1. or 2, and divide by:	P.*-P.*	Slo	ssure Curve pe = "n" - or signed lard Slope	n,x	LOG	Antilog	Deliver Equals R	Flow rability x Antilog cfd)	
											,		
Open Flow			Mcfd @ 14.6	5 psia		Deliverat	pility			Mcfd @ 14.65 ps	] ia		
	-	-	n behalf of the (	12.			uthorized (	o make t	he above repo	ort and that he h	as knowled	tge of	
ing iauts sti	mou niale	हा, साथ श <b>ास</b> इं	au repuit is true	eun cinteC	. Exaciled	u)i3 U U	(	Dani	ce P	idles	, 20		
		Witness (	f arry)		<del></del> -	•	7	<del>,-~~~</del>	For (	Ofripany			
		For Comm	lasion		·	•			Che	cked by		<del></del>	

١d	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exemp	status under Rule K.A.R. 82-3-304 on behalf of the operator Horseshoe Operating, Inc.
	at 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
	oment installation and/or upon type of completion or upon use being made of the gas well herein named.  ereby request a one-year exemption from open flow testing for the Doyle 1
	Il 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
l fu	rther agree to supply to the best of my ability any and all supporting documents deemed by Commissic
staff as	necessary to corroborate this claim for exemption from testing.
Date: _	5-24-11
	Signature:
	Title: Production Assistant
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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.