## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:			(	See Instruct	tions on Rev	rerse Side	)				
Op	en Flow			Test Date	a·			ΔPI	No. 15			
De	liverabilty	<i>!</i>		3-9-	71				-20358 - (	$O\infty$		
Company Horseshoe Operating, Inc.						Lease Watson	Farms			1	Well Number	
County Location Greeley C NE			Section 19		TWP RNG (E/ 20S 39W			W)		Acres Attributed		
Field Bradshaw			Reservolr Winfield			Gas Gathering Connection DCP Midstream						
			Plug Bac 2939'	Plug Back Total Depth 2939'			Packer S	et at	<del>- " ' </del>			
Casing S 4.5	Casing Size Weight 1.5 10.5			Internal 0 4.052	Diameter	Set at 2949'		Perforations 2831'		To 2880'		
Tubing Si 2-3/8	ubing Size Weight 4.7			Internal I	Diameter	Set at <b>2809'</b>		Perfo	rations	То		
Type Completion (Describe) Single - Gas			Type Flui Water	Type Fluid Production Water				nit or Traveling Unit - Rod	Plunger? Yes	tunger? Yes / No		
Producing	-	nnulus / Tubir	ng)	% C	Carbon Dioxid	de		% Nitrog	en	Gas Gr	avity - G <sub>e</sub>	
Vertical Depth(H)					Pressure Taps Flange					(Meter F	Run) (Prover) Size	
Pressure	Buildup:	Shut in	3-8 <sub>2</sub>	0			Taken	3	<u>-9</u> 20	11 at 10;4	15 (AM) (PM)	
Well on L	ine:	Started	20	) at		(AM) (PM)	Taken		20	at	(AM) (PM)	
		1			OBSERVE	D SURFACE		I		Duration of Shut-	n_24_Hours	
Static / Dynamic Property	Size Meter Ditte		Differential sure in	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> ) psig psia		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> ) psig psia		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	.625	5				paig	92	paig	рыа	24		
Flow							·-···					
·			<u> </u>	<del></del>	FLOW STR	EAM ATTRI	BUTES			<del></del>		
Plate Coeffiec (F <sub>b</sub> ) (F Mcfd	ient <sub>p</sub> ) /	Circle one: Meter or Prover Pressure psia	Press Extension	Gravity Factor F <sub>a</sub>		Flowing Deviation Factor F <sub>pv</sub>		ctor	Metered Flow R (Mcfd)	GOR (Cubic Fed Barrel)	Flowing Fluid Gravity G	
				(OPEN EL	OW) (DELIVI	ERABILITY)	CALCIII	ATIONS				
(P <sub>c</sub> ) <sup>2</sup> =	:	(P <sub>w</sub> ) <sup>2</sup>	<b>=</b> :	P <sub>d</sub> =		-	- 14.4) +		,	(P <sub>a</sub> ) <sup>2</sup>	= 0.207	
(P <sub>e</sub> ) <sup>2</sup> - (F or (P <sub>e</sub> ) <sup>2</sup> - (F	-	(P <sub>a</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Choose formula 1 or 2:  1. P <sub>c</sub> <sup>2</sup> - P <sub>c</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>c</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> - P <sub>c</sub> <sup>2</sup>	LOG of formula 1. or 2. and divide by:	P.2. P.2	Backpressure Curve Slope = "n"		1		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
Open Flor	en Flow Mcfd @ 14.65 psla				Deliverability			<u>_</u>	Mcfd <b>②</b> 14.65 psia			
			on behalf of the	Company, s		e is duly aut	thorized to	o make th				
	<u> </u>	<b></b>					Qa	nice	Ripe	ley	RECEIVED	
		Witness	_			_	<i>U</i>		For Co	xmpa/n/	JUN 1 0 20	
		r or com							Check	an na		

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
(Check one)
Signature:

## 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.