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

Type Tes	it:					(See Ins	tructi	ions on Rev	rerse Side	e)					
	pen Flo	W			<b></b>					451	VI. 45				
Deliverability Test Date:						7-11					No. 15 071-2017(	6-(1)(1)	$\gamma$		
Company Horseshoe Operating, Inc.							Lease Sell						Well Number 1-9		
County Greele	у		Location NE NE	n	Section 9				TWP 18S		RNG (E/W) 40W		Acres Attributed		
						Reservoir L. Winfield				Gas Gathering Connection DCP Midstream					
Completion Date Plug Back Total 8/80 2960						k Total (	Depth			Packer Se None	et at				
Casing S 4.5	ize		Weight 9.5	Internal 4.09	Internal Diameter 4.09			Set at <b>3014</b>		Perforations 2904		то 2948			
2.375 4.7					Internal   1.995	Internal Diameter 1.995			Set at <b>2950</b>		Perforations		То		
						ype Fluid Production <b>Water</b>				Pump Unit or Traveling Plunger? Yes / No Yes					
Producing Annulus	_	(Anı	nulus / Tubing)		% (	arbon D	ioxid	ie .		% Nitroge	n	Gas (	3ravity -	G,	
								sure Taps	•			(Mete	(Meter Run) (Prover) Size		
Pressure	Buildup	p: Shut in <u>3-/</u>		3-16 2	-16 20 11 at 1		0	(AM)(PM) Taken		3-17 20		11 at 10	:00	00 (AM) (PM)	
Well on L	ine:		Started	2	0 at			(AM) (PM)	Taken		20	at	<del></del>	. (AM) (PM)	
<del></del>			r	<del></del>		OBSER	₹VED	SURFACE		-1		Duration of Shu	ıt-in	24 Hours	
Static / Dynamic Property	1		Gircle one:  Mater Prover Pressure psig (Pm)	Pressure Differential In Inches H <sub>s</sub> 0	Flowing Temperature t	Well He Temperat	ature (P <sub>w</sub> ) or (P <sub>t</sub>		Pressure ) or (P <sub>c</sub> )	Tubing Wellhead Pressure (P <sub>m</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> )		Duration Liq (Hours)		uld Produced (Barrels)	
Shut-In	ut-In .75							psig	psta .	64.5	psia	24			
Flow				<u> </u>											
						FLOW S	STRE	EAM ATTRI	BUTES	<u>.</u>					
Plate Coefficci (F <sub>b</sub> ) (F <sub>c</sub> Mcfd	ent	Cicle one: Meter or Prover Pressure psia		Press Extension P <sub>m</sub> x h	Extension Fact		Te	Flowing Deviation Factor F <sub>p</sub> ,		ctor R		v GOI (Cuble I Barre	Feet	Flowing Fluid Gravity G <sub>m</sub>	
P,)2 =		:	(P <sub>w</sub> ) <sup>2</sup> =	•	(OPEN FLO	OW) (DE	LIVE %	RABILITY)	CALCUL - 14.4) +				) <sup>2</sup> = 0.	207	
(P <sub>e</sub> ) <sup>2</sup> - (P or (P <sub>e</sub> ) <sup>2</sup> - (P	-	(P <sub>c</sub> ) <sup>2</sup> - (P <sub>_</sub> ) <sup>2</sup>		1. P <sub>c</sub> <sup>2</sup> -P <sub>d</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> -P <sub>d</sub> <sup>2</sup> ided by: P <sub>c</sub> <sup>2</sup> -P <sub>w</sub> <sup>2</sup>		LOG of tomuta 1. or 2. and dMde pz.p		Backpres Slop 	sure Curve e = "n" or igned and Slope		ж [ ]	Antilog	De	Open Flow Deliverability Equals R x Antilog (Mcfd)	
	-			<del></del>								··	-		
Open Flow	v			Mcfd @ 14.6	65 psia			Deliverabi	lity		<u>.</u>	Mcfd @ 14.65 p	l osia	J	
The u	ndersig	ned	authority, on I	pehalf of the	Company, s	tates tha	at he	is duly au	thorized t	to make the	above repo	rt and that he I	has know	wledge of	
			n, and that said						8	day of	June	· 1		20 // RECEIVE	
			Witness (if as	ny)			_			ance	v Ky	Wly-		IIM I U SI	
•			For Commiss	on			_	_			Chec	cked by		ON 1 0 20	
													KC	C WICH	

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 Sell 1-9  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
Staff as necessary to corroborate this claim for exemption from testing.  Date: 6-8-//
signature: Janice Ripley  Title: Production 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.