KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:					((See Instruc	tions on Rev	erse Side	9)				
= '	oen Fio					Test Date	a:			ΔΡ	l No. 15			
De	liverat	ility				7/26	7//				1-20731-00-	00		
Company Horsesh		oera	ting, Inc.		·	, .	/ Lease Nickelson					2	Well Number	
County Greeley			Loc SW	ation		Section 4				ANG (E 39W	/ / //)		Acres Attributed	
Field Bradshaw					Reservoi Winfield					thering Conn lidstream	ection			
Completion Date 10-10-2000					Plug Bac 2917 Ti	k Total Dep	th	Packer Set at None		Set at	<u> · · · · .</u>			
Casing S 4.5	Size		Weight 10.5			Internal (4.052	Internal Diameter 4.052		Set at 2916		orations 4-19	To 2824-29		
Tubing Size 2.375			Weight 4.7			Internal Diameter . 2.000				Perforations		То		
Type Completion (Describe) Single - Gas					Type Flui Water	Type Fluid Production			Pump Unit or Traveling Plunger? Yes / No Pump Unit - Rod					
Producing Thru (Annulus / Tubing)						% C	% Carbon Dioxide				gan	Gas Gr	Gas Gravity - G	
Annulu													•	
Vertical C	Depth()	1)					Flan	sure Taps ge	•			2"	Run) (Prover) Size	
Pressure	Bulldu	p:	Shut in	7/.	25 2	0 <u>//</u> at	9:45	(AM) (PM)	Taken	7/2	6 20	11 at 9:45	5 (AM) (PM)	
Well on L	.ine:	1	Started		2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)	
							OBSERVE	D SURFACE	DATA			Duration of Shut-	in_24 HoL	
Static / Orlfice			Gircle one: Meter		Pressure Differential	ntiel Flowing We		oil Head Casing Weithead Pro			lubing ad Pressure	Duration	Liquid Produced	
Dynamic Property	Siz (inch		Prover Pres psig (Pri	sure	in Inches H ₂ 0	Temperature t	Temperature t	(P _w) or (P _n			r (P,) or (P _e)	(Hours)	(Barrels)	
Shut-In	.37	<u>5</u>	-						97.5		pau	24		
Flow									,]			
	 -	-		_			FLOW STE	REAM ATTRI	BUTES		 -			
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psla			Press Extension	Grav Fact F _c	tor	Flowing Temperature Factor F ₁₁		ation ctor	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	Flowing Fluid Gravity G _m	
			 						<u></u>					
						(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P_) ²	'= 0.207	
(P _c) ² =	 -	<u> </u>	(P _w) ²		<u> </u>	P _d =		% (P	• 14.4) +	14.4 =	 :	(P _a) ²		
$(P_a)^2 - (P_a)^2$ or $(P_a)^3 - (P_d)^3$		(P _a) ² - (P _u) ²			2. P ₂ - P ₂ 2.	LOG of formula 1. or 2. and divide	P.2. P.2	Backpressure Curve Slope = "n" 		n x 10G		Antilog .	Open Flow Deliverability Equals R x Antilo (Mcfd)	
				divid	ed by: P _e 2 - P _e 2	by:	<u>. " </u>	Sianda		-			(mc·n)	
													. <u></u>	
Open Flo	w				Mcfd @ 14.	65 psia		Deliverabil	ity			Mcfd @ 14.65 psi	3	
					ehalf of the				<u>3</u> ,	day of	augu	rt and that he ha	s knowledge of	
· · · · · · · · · · · · · · · · · · ·			Witness	(If any	<i>r</i>)				\mathcal{A}	mice	v Kif	OLLY REC	CEIVED	
			For Con	nmissio	n	· · · · · · · · · · · · · · · · · · ·	····	_			Chec	ked by AUG	1 1 2011	

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	
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 Nickelson 2 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. Signature: Signature: Signature: Signature: Signature:	I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
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Staff as necessary to corroborate this claim for exemption from testing. Date: 8/3/11 Signature: January Ripley	
Date: 8/3/11 Signature: Janice Ripley	I further agree to supply to the best of my ability any and all supporting documents deemed by Commission
Signature: <u>Janice Ripley</u>	staff as necessary to corroborate this claim for exemption from testing.
Signature: <u>Janice Ripley</u>	
Signature: <u>Janice Ripley</u>	Date: 8/3///
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Title: Production Assistant	Signature: Janua Kiplly
	Title: Froduction 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.