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

Type Test	t:					(See Instruc	ctions on Rev	rerse Side	<del>)</del> )					
Op	en Flow	V			Toot Dat				A Di	No 15 - 41	90 21	200	· -/~	
De	liverabil	lty			Test Dat				Arı	140. 10 - 0	95-21	/30	, W	
Company		٠,		-T			Lease	1.	_		#1	Well Nu	ımber	
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ounty Location NENE			Section				RNG (E	w)	Acres Attributed					
ield 5	Man	·	145-	111	Reservoi	•		•		nering Conne	ection			
54	Pive.	J - 1	Frab.	S	MI	55				<b>-</b>				
ompletic			<del></del>		Plug Bac	ck Total Dep			Packer S	et at				
3-6		19		· · · -		4270								
asing Si	IZE "	•	Weight	#	Internal	Diameter	Set a 4300		Pertor	rations	128 - 4	udu	<i>,</i>	
ubing Si	ize O	11	Weight	ī	Internal	Diameter	Set a		Perfor	retions	7 <i>0</i> To			
28 6.5*														
pe Con	npletion	(Descri	be)		Type Flu	id Productio	7	(	Púmp Un	it or Traveling	Plunger? (Yes	3)/ No		
roducino	Theu	Annulue	/ Tubing)		_()([	<i>ح المل</i> حم Carbon Diox	ter		% Nitroge		Con C	Gravity - (		
oducing	3 111111	Ailiulus	y lubing,		76 (	Jaibon Diox	iide		76 Mill Ogt	311	GES	mavny - (	<sup>2</sup> 9	
ertical D	epth(H)					Pres	sure Taps				(Meter	Run) (P	rover) Size	
	, , ,						•				,	, ,	•	
roccuro	Buildup	· Shurt	in8	2-9 2	0 // 01	1/200	(A) (BM)	Takan		20	at		(AAA) (DAA)	
	,		***											
ell on Li	ine:	Start	ed <b>a</b> _	<u>-/0</u> 2	0 <u>/                                   </u>	11:00	(AM) (PM)	Taken		20	at	(	(PM) (PM)	
	-					OBSERVE	ED SURFACE	DATA			Duration of Chu	d in	Hour	
Circle o		Circle one:	Pressura		1	Casing		Tubing		Duration of Shut-in		Hour		
tatic / mamic	Orifice Size	Meter		Differential	Flowing   Well		Wellhead Pressure		Wellhead Pressure (P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>2</sub> )		· ·		d Produced	
operty	(inches	hes) Prover Pressu psig (Pm)		Inches H <sub>2</sub> 0	t	t	t (P <sub>w</sub> ) or (P <sub>t</sub> )		psig	(P <sub>1</sub> ) or (P <sub>8</sub> )	(modis)	_ "	(Barrels)	
hut-in							100					R	ECEIVE	
Flow		+					100						C 4 3 C	
N. W							1 1					Al!	G 172	
			· ·		<u> </u>	FLOW STF	REAM ATTRI	BUTES	т		<u> </u>	ייא	CW/AL	
Plate Coeffieci		Circle one: Meter or		Press Extension	Cutanaian   City		1 Tomporeture		Deviation Metere		l l		V-V-Mas 7	
(F,) (F	)	Prover Pressure		√ P <sub>m</sub> xh	Fac F	aor	Factor	ctor F		Fl (Mcfd)	(Cubic F Barrel		Gravity	
Mcfd		psia			<u> </u>	-	F <sub>n</sub>	<u> </u>	-				G	
		<del></del>		_		<u> </u>								
					(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P.	)² = 0.2	07	
)² =		:	(P <sub>w</sub> ) <sup>2</sup> =	:	P <sub>d</sub> =		% (P <sub>a</sub>	- 14.4) +	14.4 =	:		) <sup>2</sup> =		
(P <sub>a</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup>		· · ·		00000 formula 1 or 2:			Backpress			Γ٦		Or	en Flow	
or (P <sub>a</sub> ) <sup>2</sup> - (P		"" ""		2 P1 P1	formula 1. or 2.		Slope = *		n x L	og	Antilog	1	Deliverability Equals R x Antilog	
(P <sub>a</sub> )* - (P	' <sub>a</sub> )²	divik		ed by: P <sub>a</sub> <sup>2</sup> - P <sub>y</sub> <sup>2</sup> by:		P <sup>2</sup> -P <sup>2</sup> Assig			ue			1	(Mcfd)	
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	_		-		<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		+			+	<del></del>	
pen Flow Mcfd @ 14.				65 psia Deliverability			ity	Mcfd @ 14.65 psia						
The u	ındersigi	ned auti	nority, on I	behalf of the	Company, s	states that h	e is duly aut	horized to	make the	above repor	t and that he h	as knowl	ledge of	
				report is true				1, th	lavnof	4			20 11.	
10013 31	6150 UIB	nom, an	บ แเฮเ 8ฮIQ	report is title	ZIIU CUITEC	i. EX <del>O</del> CUIOO	uno uno	<u> </u>	<i>197</i> 0''	1/40		· ²	:0 <u>-f  </u> .	
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			Witness (If ar	) (v)		_ <del>_</del>		-,		For Co	mpany			
			For Commiss	ion		<del></del>				Check	ed by			
											-			

I declare under penalty of perion, under the laws of the state of Kanasa that Low outher	
I declare under penalty of perjury under the laws of the state of Kansas that I am authorize exempt status under Rule K.A.R. 82-3-304 on behalf of the operator	Led to request
and that the foregoing pressure information and statements contained on this application for	m are true and
correct to the best of my knowledge and belief based upon available production summaries and	l 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	<del></del>
gas well on the grounds that said well:	
. (Charles and	
(Check one) is a coalbed methane producer	]
is a coalised methane produce:  is cycled on plunger lift due to water	j
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	
[A] is not suppose of producting at a starty ratio in excesse of 250 months	
I further agree to supply to the best of my ability any and all supporting documents deemed	d by Commission
staff as necessary to corroborate this claim for exemption from testing.	
	i
Date: 8-16-2011	
	RECENT
	AUCA
	AUG 1 7 Z
Signature of Andrews	KCC WICH
Signature:	
Title: \\\ \tag{Ycs.}	
	<u> </u>

## 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.