KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | : | | | (| (See Instru | ictions on Rev | erse Side |) | | | | |
|---|-----------------------------|--|--|--|------------------------------|--|---|---|---------------------|---|--|--|
| Op | en Flow | | | Test Date | • | | | ΛDI | No 1E | | | |
| √ De | liverabilty | , | | 10/20/2 | | | | | No. 15 -023-2062 | 3~000 | | |
| Company LOBO PRODUCTION, INC. | | | | Lease ADAMS-MC | | | S-MCA1 | TEE. | | 8-20 | Well Number 8-20 | |
| County Location CHEYENNE SE-NE-SW | | | Section 20 | | TWP | 41 | | /W) | Acres Attributed | | | |
| ield HERF | RY CRI | EEK NIOBR | ARA | Reservoi NIOBF | | | • | | thering Conne | ection TION, INC. | | |
| ompletic | | | | Plug Bac 1279' | k Total De | pth - | r | Packer S | Set at | | • | |
| Casing Size Weight .5" 11.60# | | Internal Diameter | | Set at 1329 | | Perforations 1171' | | то 1203' | | | | |
| Fubing Size Weight | | | Internal Diameter | | Set at | Set at Per | | rations | То | | | |
| Type Completion (Describe) SINGLE GAS | | | Type Fluid Production | | | | Pump Unit or Traveling Plunger? Yes / No NO | | | | | |
| Producing Thru (Annulus / Tubing) CASING | | | | % Carbon Dioxide | | | ٠, | % Nitrog | jen | | Gas Gravity - G _g .5956 | |
| Vertical Depth(H) F.D. 1329' | | | Pressure Taps | | | | ı | | | (Meter Run) (Prover) Size 2" METER RUN | | |
| ressure | Buildup: | Shut in 10/2 | 20 | 20_11_at_1 | 1:00 | (AM)(PM) | Taken_10 | /21 | 20 | 11 at 11:00 | (AM)(PM) | |
| ell on Li | ne: | Started | 2 | 0 at | | _ (AM) (PM) ⁻ | Taken | | 20 | at | (AM) (PM) | |
| | | | ^ 1 | | OBSERV | ED SURFACE | DATA | | | Duration of Shut- | in 24.25 Hours | |
| tatic / /namic operty | Orifice Size (inches) | Circle one: Meter Prover Pressur psig (Pm) | Pressure Differential in Inches H ₂ 0 | Flowing Temperature t | Well Head Temperatur t | mperature t Wellhead Press | | (P_w) or (P_t) or (P_c) | | Duration (Hours) | Liquid Produced (Barrels) | |
| hut-In | | | 2 | | | 162 | psia | psig | psia | 1 15 2 3 | | |
| Flow | | | | | | | | | | | | |
| | • | | | | FLOW ST | REAM ATTRIE | BUTES | | | | | |
| Plate Coefficeient (F _b) (F _p) Mcfd | | Circle one: Mater or Prover Pressure psia Prover Pressure | | Gravity Factor F _g | | Flowing Temperature Factor F _{ft} | | Deviation Metered Flo Factor R F _{pv} (Mcfd) | | GOR (Cubic Fe Barrel) | - Gravity i | |
| ,)² = | : | (P _w) ² =_ | · | (OPEN FLO | - ' | VERABILITY) | CALCULA - 14.4) + | | : | (P _a) | ² = 0.207 ² = | |
| $(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$ | | (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² 2. P _c ² - P _d ² divided by: P _c ² - P _w ² | | LOG of formula 1. or 2. and divide by: | | Backpressure Curve Slope = "n"or Assigned Standard Slope | | 7 7 106 | | Antilog | Open Flow Deliverability Equal A A TOP | |
| | | | | il | | | | ۲. | | | NOV 2 1 2 | |
| oen Flov | | 8 * | Mcfd @ 14. | 65 peia | | Deliverabili | tu | | | Mofd @ 14.05 | KCC WICH | |
| The u | ndersign | ed authority, on | behalf of the | Company, s | | he is duly auti | norized to | | e above repo | Mcfd @ 14.65 psi | as knowledge of | |
| facts st | ated ther | ein, and that sai | d report is true | e and correc | t. Execute | d this the 15t | <u>n</u> /// | tay of N | oyember | 1. m | $\frac{1}{20}\frac{11}{4}$. | |
| | | Witness (if | anv) | 5 H | | , | 156 | Nu | ~ / / | C // | w | |

| | r penalty of perjury under the laws of the state of Kansas that I am authorized to request er Rule K.A.R. 82-3-304 on behalf of the operator LOBO PRODUCTION, INC. | , |
|--|---|----|
| and that the foregone correct to the best of equipment insta | oing pressure information and statements contained on this application form are true and of my knowledge and belief based upon available production summaries and lease records lation and/or upon type of completion or upon use being made of the gas well herein named. st a one-year exemption from open flow testing for the ADAMS-MCATEE 8-20 munds that said well: | |
| (Check | | on |
| Date: <u>11/15/2011</u> | · · · · · · · · · · · · · · · · · · · | |
| | Signature: Kuhu A. Mulu Title: Owner/Operator | |

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.