KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes					(See Instruct	tions on Rev	verse Side)			
= .	pen Flo eliverab				Test Date 04/27/2					No. 15 071-20853-	0000	
Company Cimarex		gy C	o.				Lease Burgard	t			No. 3	Well Number
County Greeley			Location NE,SE,NW		Section 34		TWP 17S		RNG (E/W) 40W		Acres Attributed	
Field Byerly				Reservoi Towand	r la / Ft. Rile	ey .		Gas Gathering Cor DCP Midstream		ection		
Completi 02/08/20		le			Plug Bac 3065	k Total Dep	th		Packer 5 N/A	Set at		·
Casing Size 4 1/2"			Weight 10,5		Internal Diameter		Set at 3105		Perforations 2878		то 2926	
Tubing Size 2 3/8"			Weight 4.7		Internal Diameter		Set at 2950		Perforations		То	
Type Completion (Describe) Single			escribe)			Type Fluid Production Salt Water		Pump Unit or T Pumping ur				
Producing Thru (Annulus / Tubing) Annulus))	% Carbon Dioxide				% Nitrogen		Gas Gr	Gas Gravity - G	
Vertical D	Depth(H	1)				Pres	sure Taps		•	·	(Meter I	Run) (Prover) Size
Pressure	Buildu	p: :	Shut in	26	20 11 at 1	0:00	(AM) (PM)	Taken 04	4/27	20	11 at 10:00	(AM) (PM)
Well on L	Line:	,	Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
				·····		OBSERVE	D SURFACI	E DATA	,		Duration of Shut-	in 24 Hour
Static / Dynamic Property	utic / Orifice amic Size perty (inches)		Circle one: Meter Prover Pressu psig (Pm)	Pressure Oifferential re in Inches H ₂ 0	Flowing Well Head Temperature Temperatu		Casing Wellhead Pressure (P _*) or (P ₁) or (P ₂) psig psia		Tubing Wellhead Pressure $(P_w) \propto (P_t) \propto (P_{\phi})$ psig psia		Duration (Hours)	Liquid Produced (Barrels)
Shut-In							22					
Flow	<u> </u>								<u> </u>			
Plate			Circle one:		1		Flowing	IBUTES			 	Flowing
Coefficient (F _b) (F _p) Mcfd		Meter or Prover Pressure psia		Press Extension ✓ P _m xh	Extension Fac		Temperature Factor F _{tt}	e Deviation Me Factor F _p ,		Metered Flor Pl (Mcfd)	w GOR (Cubic Fe Barrel)	et/ Fluid
					(OPEN FL	OW) (DELIV	ERABILITY) CALCUL	ATIONS		(P _•)	² = 0.207
(P _c) ² =		<u>-:</u>	(P _w) ² =	Choose formula 1 or 2	P _d =		1	² - 14.4) +		:	(P _d)	² =
(P _e) ² - ((P	a)2- (P _w)2	1. P _c ² - P _a ² 2. P _e ² - P _d ² divided by: P _c ² - P _w	LOG of formula 1, or 2, and divide by:	P ₂ 2 - P ₂ 2	Slop	ssure Curve De = "n" Or Signed ard Slope	n x	rog	Antilog	Open Flow Detiverability Equals R x Antilog (Mcfd)
												
Open Flo)w			Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 psi	L
The	undersi	igned	authority, or	behalf of the	Company, s	states that h	ne is duly au	thorized t	o make ti	ne above repo	ort and that he ha	s knowledge of
				id report is true	and correc				day of	anuary		30 12
			Witness (ii	any)	JAN	1 3 2012	; (-		ury	For	longy (<u></u>
			For Comm	ission	KCC V	VICHIT	- A			Che	cked by	

I declare under penalty of perjury under the laws of the state of Kansas that I am auth xempt status under Rule K.A.R. 82-3-304 on behalf of the operator Cimarex Energy Co.	orized to request
nd that the foregoing pressure information and statements contained on this application f	
orrect to the best of my knowledge and belief based upon available production summaries a	
f equipment installation and/or upon type of completion or upon use being made of the gas w	eli herein named.
I hereby request a one-year exemption from open flow testing for the Burgardt No. 3	
as 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 deen	ned by Commission
taff as necessary to corroborate this claim for exemption from testing.	
ate: 01/11/2012	_
	RECEIVE
	JAN 17.
10	WO-
Signature: //Qing	PECEIVE JAN 13 2 KCC WICH
Title: Administrative Assistant	
TIME:	

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.