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

Type Test:  Open Flo			(1	See Instructi	ons on Rev	rerse Side	- <b>: • -</b> 3)				
Deliverab		Test Date: 11/7/11						No. 15 147-21,565	- 000	$\mathcal{C}$	
Company McCoy Petroleum Corporation					Lease Spriggs	Lease Spriggs *A"			Well Number 1-20		
County Location Edwards SW SW			Section 20		TWP 26S			<b>N</b> )		Acres Attributed	
Field Mull West			Reservoir Mississi			<b></b>	Gas Gathering Connection SemGas				
Completion Date 2-4-08			Plug Back 4553'	k Total Depti	h		Packer Set at				
Casing Size			Internal Diameter		Set at 4560'		Perforations 4538'		то 4553'		
ubing Size 2-3/8"	ng Size Weight		Internal D	Diameter		Set at 4531'		Perforations		То	
ype Completion (Describe)			Type Fluid Production Gas & Water			•	Pump Unit or Traveling Plunger? Yes / No Pump Unit				
Producing Thru (Annulus / Tubing)			% Carbon Dioxide			<del></del>	% Nitroge		Gas Gr	Gas Gravity - G <sub>g</sub>	
ertical Depth(F	1)			Press	ure Taps	<del></del> _			(Meter	Run) (Prover) Siz	
Pressure Buildu	n: Shut in	1/7	11 , 10	0:00 AM	(AM) /PM)	Taken	11/8	20	11 , 10:00	AM_ (AM) (PM	
Vell on Line:										(AM) (PM	
				OBSERVE	D SURFACE	E DATA			Duration of Shut-	-inHo	
Static / Orlfice Circle ene: Pressure ynamic Size Meter Oliferential roperty (Inches) psig (Pm) Inches H <sub>2</sub> 0		Differential .	Flowing Well Head Temperature t Temperature		Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Tubing Wellhead Pressure (P <sub>u</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Duration (Hours)	Liquid Produce (Barrels)	
Shut-tn					240#	psia	psig	psia	24	1	
Flow											
·	Circle one:		1	FLOW STRI		BUTES	· · · · · · · · · · · · · · · · · · ·		1		
Coefficient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd	efflecient Mater or Extension  F <sub>b</sub> ) (F <sub>p</sub> ) Prover Pressure		Gravity Te		Flowing emperature Factor F <sub>ri</sub>	Fa	viation actor F <sub>pv</sub>	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	eet/ Fluid	
			•	OW) (DELIVE						)² = 0.207	
P <sub>a</sub> ) <sup>2</sup> =		Choose formula 1 or 2:	P <sub>a</sub> ≖.	<u>*</u>		14.4) - ssure Curve	1	<del>:</del>	(P <sub>d</sub> )	)2 =	
(P <sub>a</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup> or (P <sub>a</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup>	(P <sub>e</sub> ) <sup>2</sup> - (P <sub>u</sub> ) <sup>2</sup>	1. P <sub>2</sub> <sup>2</sup> -P <sub>2</sub> <sup>2</sup> 2. P <sub>2</sub> <sup>2</sup> -P <sub>3</sub> <sup>2</sup> divided by: P <sub>2</sub> <sup>2</sup> -P <sub>3</sub> <sup>2</sup>	formuta 1.p2 1.or 2. d and divide   p2_p2		Slope = "n"		n x LOG		Antilog	Open Flow Deliverability Equals R x Anti (Mcfd)	
Open Flow Mcfd @ 14.65 psia					Deliverability Mcfd <b>②</b> 14.65 psia						
The unders	igned authority, or herein, and that sa	n behalf of the ( aid report is true	Company, s	states that he	e is duly au this the <u> </u>	thorized I		above repo	rt and that he ha	as knowledge of	
<del></del>	Witness (il				_	>	Sert	T The	mpel	RECEIV	
·	For Comm				_			- rar C	ked by	DEC 3.0	
	ru cumm	named (						-riec	nev ut		

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 McCoy Petroleum Corporation 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 Spriggs "A" #1-20 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.  Date:/2/28//I
Signature:

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.