KCC MICHITA

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	it:				(See Instruct	tions on Re	verse Side)				
☐ o	pen Flo	w											
De	eliverab	ilty			Test Date 9/11/20				API 15-	No. 15 007-20866	1- 000C)	
Company Lotus C		ting	Company	LLC			Lease Lois P	latt				Well Nu	ımber
County Barber			Locati NE NV	on	Section 8		TWP 35S		RNG (E/	W)		Acres A	Attributed
Field Hardtne	er				Reservoir Mississ				Gas Gat	hering Conn	ection		
Completi 8/7/198		0			Plug Bac 4900	k Total Dep	th		Packer S none	Set at			
Casing S 4 1/2"	Size		Weigh 9.5#	t	Internal (4.09	Diameter	Set 490		Perfo 484	rations 0	то 4850		
Tubing S 2 3/8"	iize		Weigh 4.7#	t	internal (1.995	Diameter	Set 488		Perfo	rations	То		
Type Cor Acid &	•	n (De	escribe)		Type Flui oil & w	d Production	n		Pump Ur yes	nit or Traveling	Plunger? Yes	/ No	
	•	(Anı	nulus / Tubing))	% C	arbon Dioxi	de		% Nitrog	en	Gas Gr		3,
Annulu		15					T				.6492		\ D'
Vertical C	Jeptn(r	1)				Pres	sure Taps				(Meter	Run) (P	rover) Size
Pressure	Bulldu	p :	Shut in 9/1	12	11 at 3	:00 pm	(AM) (PM)	Taken 9/	12	20	11 at 3:00 p	m	(AM) (PM)
Well on L	Line:		Started	2	0 at		(AM) (PM)	Taken		20	at		(AM) (PM)
						OBSERVE	D SURFAC	E DATA			Duration of Shut-	in	Hours
Static /	Orifi	co	Circle one:	Pressure	Flowing	Well Head	Ca	sing	Ī -	iubing	CONTROL OF CHIEF		
Dynamic Proporty	Siz (inch	0	Meter Prover Pressu psig (Pm)	re in Inches H ₂ 0	Temperature t	1		Pressure		ad Pressure (P _t) or (P _c)	Duration (Hours)		d Produced Barrels)
Shut-In			· ·				180	194.4	parg	pau			
Flow	<u></u>												
						FLOW STR	EAM ATTR	IBUTES					
Plate Coeffied (F _b) (F	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension P _m x h	Grav Fac	tor 1	Flowing Femperature Factor F ₁₁	Fa	lation ctor	Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
]
(P _c)² =		:	(P _w) ² =	:	(OPEN FLO	OW) (DELIV		') CALCUL P _o - 14.4) +		:		² = 0.2 ² =	07
				Choose formula 1 or 2	:		I	ssure Curve				Γ	en Flow
(P _a) ² - (_	(F),1 · (P,)*	1. P.*-P.*	LOG of formula 1. or 2.			pe = "n" - or	n x l	LOG	Antilog	Del	iverability
(P _e) ² · (P _a)*			2. P _e *-P _e * avided by: P _e *-P _e *	and divide	P _c ² - P _u ²		signed lard Slope			•		R x Antilog ((Mcfd)
					1	<u> </u>				· · · · · · · · · · · · · · · · · · ·			
Open Flo	w			Mcfd @ 14.	65 psia		Deliveral	oility			Mcfd @ 14.65 psi	ia	
				behalf of the			_			e above repo ovember	rt and that he ha		ledge of 20 11 .
aio iacis s	naigu l	1016[n, and triat Sa	ווויו צו וזטעסי טוי	and conec	LAGCUIGO	ans ure		uay 01	(1/	$\overline{}$	· ˈ	· · ·
			Witness (ii	any)				<u>ar</u>	عمر	> Color	Оптрапу	RECE	IVED_
			For Comm	eeinn			-			Cha	D D	EC 2	9 2011

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Lotus Operating Company, LLC and that the foregoing pressure information and statements contained on this application form are correct to the best of my knowledge and belief based upon available production summaries and least of equipment installation and/or upon type of completion or upon use being made of the gas well herein I hereby request a one-year exemption from open flow testing for the Lois Platt #1 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	e true and
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I further agree to supply to the best of my ability any and all supporting documents deemed by C	Commissior
staff as necessary to corroborate this claim for exemption from testing.	
Date: 11/1/2011	
Signature:	
Title: Managing Member	

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.