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

Type Test					(	(See Instruct	tions on Re	verse Side	<del>)</del> )					
Open Flow Deliverabilty				Test Date	e: 11,2011		API No. 15 15-007-10281-00-00							
Company		LC	EB, LLC.				Lease THOM	PSON		007 1020	D-1	Well Nu	mber	
County Location BARBER 660'FSL&1320'FWL			Section 9		TWP 33S	TWP		w)		Acres Attributed				
Field MEDIC		.0[		eg i	Reservoi	r SSIPPI		٠, ٠	13W Gas Gath APC	nering Conne	ection .			
Completic		9				k Total Dept	h i	· v·	Packer S NONE					
Casing Si			Weight Internal Diameter Set at Perforations 24.000 6.336 4696 4696				To 4745	то 4745						
Tubing Si	ze		Weigh	Weight Internal Diameter Set at Perforations		То								
Type Con		(D	escribe)			id Production	ז		Pump Un		Plunger? Yes	/ No		
Producing	•	(Anı	nulus / Tubing	j)	% (	Carbon Dioxi	de		% Nitroge	en	Gas G	ravity - (	a <sub>g</sub>	
Vertical D	epth(H	)		· · · · · · · · · · · · · · · · · · ·		Press	sure Taps	<u> </u>	1,		(Meter	Run) (P	rover) Size	
	Buildu	 D:	Shut in 9-1	0-11	20 at		(AM) (PM)	Taken 9-	11-11	20	at	(	AM) (PM)	
Well on Li					20 at		(AM) (PM)	Taken		20	at	(	AM) (PM)	
	•			,	- 1.	OBSERVE	D SURFACE	DATA	T		Duration of Shut	-in_24	Hours	
Static / Dynamic Property	Orific Size (inche	•	Circle one:  Meter  Prover Pressu  psig (Pm)	Pressure Differential in Inches H <sub>2</sub> 0	Flowing Temperature t	Well Head Temperature t	Cas Wellhead (P <sub>w</sub> ) or (P	Pressure	Wellhea	ubing ad Pressure (P <sub>t</sub> ) or (P <sub>c</sub> ) psia	Duration (Hours)		Liquid Produced (Barrels)	
Shut-In							50	рыа	paig	psia	24			
Flow														
					<del></del>	FLOW STR	EAM ATTR	BUTES	<del></del>					
Plate Coeffieci (F <sub>b</sub> ) (F <sub>p</sub> Mcfd	ent	Pro	Circle one: Meter or ver Pressure psia	Press Extension ✓ P <sub>m</sub> x h	Grav Fac F <sub>s</sub>	tor T	Flowing emperature Factor F <sub>11</sub>	Fa	iation ctor	Metered Flow R (Mcfd)	GOR (Cubic F Barrel	eet/	Flowing Fluid Gravity G <sub>m</sub>	
/D \2			(D. )2 -		-	OW) (DELIVI						) <sup>2</sup> = 0.2	07	
(P <sub>c</sub> ) <sup>2</sup> =			(P <sub>w</sub> ) <sup>2</sup> =	Choose formula 1 or 2	P <sub>d</sub> =			<u>-</u> - 14.4) +	14.4 =	<del></del> :	(P <sub>d</sub>	)² =		
(P <sub>c</sub> )²- (F	2,)2	(P	(P <sub>w</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	1. P <sub>c</sub> <sup>2</sup> -P <sub>a</sub> <sup>2</sup>	LOG of formula			ssure Curve e = "n"	n x L	ر آ آ ا		1 .	en Flow verability	
or (P <sub>c</sub> ) <sup>2</sup> - (F	) <sub>d</sub> ) <sup>2</sup>			2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	1. or 2. and divide	P <sub>c</sub> <sup>2</sup> -P <sub>w</sub> <sup>2</sup>	Ass	orsigned ard Slope	" * "		Antilog	Equals	R x Antilog	
					.,									
Onen Flou			,	Mata @ 14	CE noin		Deliverek	,	<u> </u>	· · ·				
Open Flow The u		nec	l authority or	Mcfd @ 14.		states that he	Deliverabi		make the	; ·	Mcfd @ 14.65 ps		edge of	
									day of Oc		- and that NO II		20 11 .	
	ated th	ereli	n, and that sa	id report is true	E AND CORRECT	. executed	uns the	<u>.</u> ر	lay or <u>s</u>	1 % N	Ella.	, 2	<u> </u>	
			Witness (if	any)		<del></del>		••	man	For C	ompany			
·			For Commi	ssion	andre and a second a second and		appring.	·····		Chec	ked by	RE	CEIVEL	

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	y of perjury under the laws of the state of Kansas that I am authorized to request
	A.R. 82-3-304 on behalf of the operator HERMAN L. LOEB , LLC.
• •	ssure information and statements contained on this application form are true and
•	owledge and belief based upon available production summaries and lease records
• •	d/or upon type of completion or upon use being made of the gas well herein named.
	year exemption from open flow testing for the
gas well on the grounds the	at said well:
(Chack and)	
(Check one)	had mathana producer
	bed methane producer
	d on plunger lift due to water
	rce of natural gas for injection into an oil reservoir undergoing ER
——————————————————————————————————————	cuum at the present time; KCC approval Docket No
<b>✓</b> is not ca	apable of producing at a daily rate in excess of 250 mcf/D
I further eared to ound	u to the best of my shility any and all supporting desuments desmed by Commission
•	y to the best of my ability any and all supporting documents deemed by Commission
stan as necessary to corro	borate this claim for exemption from testing.
Date: 10-20-11	
	•
	Signature: Seshe H. Ollham
•	Title: REP. HERMAN L. LOEB LLC.

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.