KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

YAR. JAU+		•	See uisuuci	lions on Rev	ersa Siuaj						
w		Toot Date:				ADLI	No. 15				
ilty		resi Dale.		7-11		AFII		7-20-9	30 -	α	
				Lease							
100 /A	rr				J. 7.	Py	1e			/	
Locati	on	Section		TWP		RNG (E/	W)		Acres A	ttributed	
VANds		14		245		16	W		3	20	
,		Reservoir				Gas Gath	ering Connect	ion			
pry	MIS	$r \subset \ell$	ent	10 A			Sen G	<u> </u>			
, , , , , , ,	_	Plug Back	Total Depth) 		Packer S	et at	•			
1-27-8	<u>Z </u>		437	1							
vveign	, zz ;	Internal U	iameter	Set a	t <i>///////</i>	⊬епо	ations	10	1120	-	
Weigh	1	Internal O	iameter	Set 8	7 7/6	Perfor	742.4	7	7331	<u>د</u>	
7.5	•	1.	ය ර	200.0		,	450113				
(Describe)		Type Fluid	Production		, , ,	Pump Un	it or Tr aveling f	Hunger? (Yes)	/ No		
ningled	1	110+0	-	me a	sail	,			-		
(Annulus / Tubing)	1	% Carbon	Dloxide			% Nitroge	en	Gas Gr	ravity - (3.	
										•	
i) .			Pressu	re Taps				(Meter F	Run) (Pr	over) Size	
4278			F	IANO	₹.			,	3.0	0	
n: Shutin 7	- 2-11 -	2, 6	7:15	(AM) (DIA)	Tokon 7	7-8-1		3 9:	15	(AM) (DA	
			•								
Started	19	at		(AM) (PM)	Taken		19	at		(AM) (PM)	
			OBSERVE	D SURFACI	E DATA			Duration of Shut	-in	Hour	
Circle one:	Pressure	riat.	111-11 11	Cas	ing	1	- 1		T		
Meter or	Differential	- 1	Temperature		Pressure Well		4			Liquid Produced	
0.S		t	t					(Hours)—	'	(Barrels)	
-				 	psta	psig	psta		+		
	_			70		ļ <u>.</u>	_				
				123							
			FLOW STR	EAM ATTR	IBUTES	L		····			
Circle one:	8			Flowing		-				Flowing	
fiecient Meter or Extension		Gravity		Temperature Devis						Fluid	
	š P x H			Factor			(Mcfd)			Gravity	
						-				.G_	
-	<u>-</u>	(OPEN FLO	W) (DEL IV)		CALCIII	ATIONS		40.1	12 - 0 1	202	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	EKABILIT) ² = 0.3	207	
: (₽)² =		•			-		:	íP.	γ =		
_: (P _w)² =		P _d =		% (F	P _e - 14.4) +		: 	(P _a			
: (P _w) ² =	<u> </u>	P _d =		% (F	-	14.4 =	: :		o	pen Flow	
	Choose formula 1 or 2:	LOG of formula 1, or 2.		Backpre Slop	2 - 14.4) + ssure Curve		-oe]	(P _d	De	oliverability ils R x Antilog	
	Choose formula 1 or 2:	P _d = LOG or formula		Backpre Slor	Ssure Curve pe = "n"	14.4 =	.oc []		De	liverability	
	Choose formule 1 or 2: 1. P _E ² - P _d ² 2. P _E ² - P _d ²	LOG of formula 1, or 2, and divide		Backpre Slor	ssure Curve pe = 'n" - or signed	14.4 =	.oc []		De	oliverability ils R x Antilog	
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I declare under penalty or 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
and that the foregoing information and statements contained on this application form are true and correct to
the best of my knowledge and belief based upon gas production records and records of equipment installa-
tion and/or of type completion or upon use of the gas well herein named.
I hereby request a permanent exemption from open flow testing for the
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 incapable of producing at a daily rate in excess of 250 mcf/D
·
Date: 7.1. 8 1011
Date: <u>July 8, 2011</u>
Date: <u>July 8, 2011</u>
Date: <u>Τυίψ 8, 2011</u>
Date: <u>ΤυΙ , β, 1011</u>
Signature:

Instructions:

All active gas wells must have at least an original G-2 form on file with the conservation division. If a gas well meets 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 obtain a testing exemption.

At some point during the succeeding calendar year, wellhead shut-in pressure shall be 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.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than thirty (30) days after the taking of the pressure reading. The form must be signed and dated on the front side as though it was a verified report of test results.