KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:					(See Instru	ucti	ions on Re	vers	se Side	}						
or	en Flo	w																
√ De	liverat	lity				Test Date 11-4-11							No. 15 069-20281 -	00-0	> 0			
Company		nerg	y, Inc.			.,,,,,,			Lease Schmid	it					1-30	Well No	ımber	
County Location Gray 990FNL&2310FEL				Section 30	TWP 27S			RNG (E	W)	Acres Attributed								
Field AOK						Reservoir Chase	r					Gas Gat OneOk	hering Conn	ection				
Completi- 12-27-04		0				Plug Bac 2724	k Total De	epti	h	•		Packer \$	Set at					
Casing Size Weight 4.5" 10.5#				Internal Diameter 3.927"			Set at 2724				rations 9-2665	то 2684-2690						
Tubing Size Weight 2.375" 4.7#				Internal Diameter 1.901			Set at 2710				rations 8-2702	То						
Type Cor single-t							d Producti SW day		: I		, _,		nit or Traveling		? Yes	/ No		
Producing	g Thru	(An	nulus / Tubir	ng)			arbon Dio	oxic	de			% Nitrog	en		Gas Gr	avity - (3,	
Annulu	_					.138		26.00				.6887						
Vertical E	Depth(F	1)					Pre	ess	sure Taps						(Meter i	Run) (P	rover) Size	
Pressure	Buildu	p:	Shut in 11	-4	20	11 at 6	MA 00:		(AM) (PM)	Tal	ken_11	-5	20	11 at_	6:00 A	M	(AM) (PM)	
Well on L	.ine:		Started		20	at			(AM) (PM)	Tal	ken		20	at _			(AM) (PM)	
							OBSERV	/E[SURFAC	E D	ATA			Duration	of Shut-	in_24	Hours	
Statle /	Orlfi		Circle one: Meter	Pressu	Hall	Flowing	Well Head		Cas Wellhead	_	ssure		lubing ad Pressure	Dura	ation	Llqui	d Produced	
Dynamic Property	(inches)			in lemperature		Temperature t		(P _w) or (P ₁) or (P _c) pelg psis		_	(P _w) or (P _t) or (P _o) psig psia		(Hours)			(Barrels)		
Shut-In					_			_	160									
Flow										_						<u> </u>		
	- 1			•		1	FLOW ST	TRE	EAM ATTR	IBU	ITES						 1	
Plate Coefficient (F _b) (F _p) Pr		Pro	Circle one: Meter or ver Pressure	Extensi	Press Extension		r Te		Flowing emperature Factor		Devia Fac	tor	Metered Flow	GOR (Cubic Fee Barrel)		et/	Flowing Fluid Gravity	
Mcfd			psia	ν P _m ,	n	F _o	<u>'</u>	,	F _{It}	1	F,	•	(Mcfd)		Barrel)		G,	
(P _g) ² =			(P_)³ :			(OPEN FLO		IVE %			ALCUL# 14.4) +		•		(P _a) ² (P _a) ²	= 0.2	07	
	T	<u> '-</u>	- 1	Choose formula	1 or 2:	i		- ^` 1	Backpre						(₄)			
(P _a)²- (F or (P _a)²- (F	P_)*	(P	");- (b");	 P_a² - P P_a² - P divided by: P_a² 		LOG of formula 1. or 2. and divide by:	P°s - P°s		Slop	pe = - or signe	"n" ed	nxi	.og Bo.	Anti	log	Del Equals	en Flow iverability R x Antilog (Mcfd)	
											•							
Open Flor	<u></u>			Mcfd @	14.6	5 nela			Deliverab	ility			j	Mcfd @ 1	4 65 nei			
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		_	f authority, c n, and that s							_		make th ay of <u>Ja</u>	e above repo anuary	rt and th	at he ha		ledge of 20 <u>12 </u>	
					<u>-</u>		EIVE				A	1					•	
			Witness	(if eny)			1 8 20	-	_		7/		For C	опралу				
			For Com	nission				-	_				Chec	ked by				
						とつし ハ	MCHI.	T/	4									

exempt status under	penalty of perjury under the laws of the state of Kansas that I am authorized to request
	Rule K.A.R. 82-3-304 on behalf of the operator SandRidge Energy, Inc ng pressure information and statements contained on this application form are true and f my knowledge and belief based upon available production summaries and lease records
	ation and/or upon type of completion or upon use being made of the gas well herein named. t a one-year exemption from open flow testing for the Schmidt 1-30
gas well on the grou	
is is I further agree to	s a coalbed methane producer s cycled on plunger lift due to water s a source of natural gas for injection into an oil reservoir undergoing ER s on vacuum at the present time; KCC approval Docket No s not capable of producing at a daily rate in excess of 250 mcf/D s supply to the best of my ability any and all supporting documents deemed by Commission of corroborate this claim for exemption from testing.
Date: 1-13-2012	Signature: Title: Director of Operations

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.