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

| Type Test  | t:                |        |                                       |   | (                      | See Instruct   | ions on Re                    | verse Side                           | )                         |                                       |                     |                               |                              |
|--|-------------------|--------|---------------------------------------|---|------------------------|--|-------------------------------|--------------------------------------|---------------------------|---------------------------------------|---------------------|-------------------------------|------------------------------|
| ∐ Ор   | en Flo            | W      |                                       |   | Tost Date              |  |                               |                                      | API N                     | lo 15                                 |                     |                               |                              |
| √ De   | liverab           | ilty   |                                       |   | Test Date<br>12-25-1   |  |                               |                                      | 097-                      | 21,300 – <b>5</b>                     | $\alpha$ - $\alpha$ | 2                             |                              |
| Company<br>TGT Pet                                 |                   | m C    | orporation                            |   |                        | <del></del>  | Lease<br>Ashley               | ——<br>А                              | <del></del>               | · <del></del>                         |                     |                               | ll Number                    |
| County<br>Kiowa                                    | · ·               |        |                                       | Section 35  |                        |  |                               | RNG (E/M                             | RNG (E/W)<br>19W          |                                       | Acr                 | es Attributed                 |                              |
| Field<br>Einsel                                    |                   |        |                                       |   | Reservoir<br>Mississi  |  |                               |                                      |                           | ering Conn<br>as Marketi              |                     |                               |                              |
| Completic  | on Dat            | :0     | <u> </u>                              |   |                        | k Total Dept   | h                             | <del>_,</del> ,                      | Packer Se                 |                                       |                     |                               |                              |
| Casing S   | ize               |        | Weight                                |   | Internal (             | Diameter   | Set a                         |                                      | Perfora                   | itions                                |                     | To                            | -· <del></del> •             |
| 5 1/2"<br>Tubing Si                                | ze                |        | 15<br>Weight                          |   | 5<br>Internal (        | Diameter   | 485<br>Set                    |                                      | 4812<br>Perfora           | tions                                 |                     | 4816<br>To                    |                              |
| 2 3/4"<br>Type Con                                 | npletio           | n (D   | escribe)                              |   | Z<br>Type Flui         | d Production   |                               |                                      | Pump Unit                 | r Traveling                           | Plunger?            | Yes                           | No                           |
| Singl  | e(G               | as     | +0il)                                 |   | Salti                  | vater  |                               |                                      |                           |                                       |                     |                               |                              |
| Producing Annu                                     | g Thru            | (An    | nulus / Tubing                        | )   |                        | Carbon Dioxid  | de                            |                                      | % Nitroge                 | n                                     | (                   | Gas Gravit                    | y - G <sub>g</sub>           |
| Vertical D   |                   | 1)     |                                       |   | • -                    | Press  | sure Taps                     |                                      |                           |                                       |                     | (Meter Run                    | (Prover) Size                |
|  | <br>Buildu        | <br>D: | Shut in 12-2                          | 25 2  | 0.11 at 8              | :00 7  | (AM) IPM)                     | Taken_12                             | 2-26                      | 20                                    | 11 at 8             | 3:00                          | . (AM) (PM)                  |
| Well on L  | .lne:             |        |                                       | 2:  |                        |  |                               |                                      |                           |                                       |                     |                               | (AM) (PM)                    |
|  |                   |        |                                       |   |                        | OBSERVE  | D SURFAC                      | E DATA                               |                           |                                       | Duration o          | of Shut-in_                   | 24 Hours                     |
| Static /<br>Dynamic                                | Orifi<br>Siz      | e      | Circle one:<br>Mater<br>Prover Pressu | Pressure<br>Differential  | Flowing<br>Temperature | 1 .  | Cas<br>Wellhead<br>(P_) or (F |                                      | Wellhead                  | oing<br>I Pressure<br>P,) or (P,)     | Durati<br>(Hour     | ion                           | Liquid Produced<br>(Barrels) |
| Property   | (inch             | es)    | psig (Pm)                             | Inches H <sub>2</sub> 0   | t                      | t  | psig                          | psia                                 | psig                      | psia                                  | ,                   |                               | 10000                        |
| Shut-In  |                   |        |                                       |   |                        |  |                               | 250                                  |                           |                                       | 24                  |                               |                              |
| Flow   | L                 |        |                                       |   |                        | FLOW STR   | EAM ATTE                      | IBUTES                               | <u> </u>                  | <b></b>                               |                     |                               |                              |
| Diete  |                   |        | Circle one:                           | _   |                        | 72011 3111   | Flowing                       |                                      | j                         |                                       |                     | <del> </del>                  | Flowing                      |
| Plate<br>Coeffleci<br>(F <sub>b</sub> ) (F<br>Mcfd | ient<br>,)        | Pro    | Meter or<br>over Pressure<br>psia     | Press Extension  P <sub>m</sub> x h                                 | Grav<br>Fac            | tor T  | emperature<br>Factor          | Fa                                   | iation<br>ctor<br>:<br>P* | Metered Flor<br>R<br>(Mcfd)           |                     | GOR<br>Cubic Feet/<br>Barrel) | Fluid<br>Gravity<br>G        |
|  |                   |        |                                       |   |                        |  |                               |                                      |                           |                                       |                     | <u>.</u>                      |                              |
| (P <sub>a</sub> ) <sup>2</sup> =                   |                   | :      | (P <sub>w</sub> )² =                  | :   | (OPEN FL               | OW) (DELIVI  |                               | ) CALCUL<br>P <sub>e</sub> - 14.4) + |                           | :                                     |                     | $(P_{d})^2 = (P_{d})^2 = 0$   |                              |
| (P <sub>e</sub> ) <sup>2</sup> - (F                |                   | (F     |                                       | 1. P <sup>2</sup> -P <sup>2</sup> 2. P <sup>2</sup> -P <sup>2</sup> | <del>-,-</del>         |  | Backpre<br>Slo                | ssure Curve                          | 2 2 10                    | og                                    | Antilo              |                               | Open Flow<br>Deliverability  |
| (P <sub>e</sub> ) <sup>2</sup> - (F                | P <sub>4</sub> )2 |        |                                       | ivided by: $P_0^2 - P_w^2$  | and divide             | P <sub>c</sub> <sup>2</sup> ·P <sub>w</sub> <sup>2</sup> |                               | signed<br>lard Slope                 |                           |                                       |                     |                               | quals R × Antilog<br>(Mcfd)  |
| 0  |                   |        |                                       | 14-14-6-44  | 05                     |  | Palinear                      |                                      |                           | · · · · · · · · · · · · · · · · · · · |                     | 1.05                          |                              |
| Open Flor  |                   | igos   | d guthority on                        | Mcfd @ 14.  |                        | statan that L  | Deliverat                     | •                                    | n maka sh-                | aham                                  | Mcfd @ 14           |                               | noudadas at                  |
|  |                   | -      | •                                     | behalf of the   |                        |  | •                             |                                      |                           | •                                     | mi anu ina          |                               | ECEIVED:                     |
|  |                   |        |                                       |   |                        |  |                               |                                      |                           |                                       |                     |                               |                              |
|  |                   |        | Witness (if                           | any)  |                        |  | -                             | Ì                                    |                           | For                                   | Company             |                               | <del>R 1 5 201</del> 2       |
|  |                   |        | For Commi                             | ssion   | ************           |  | -                             |                                      | *                         |                                       | cked by             | KCC                           | WICHITA                      |

| exempt status under Rule K.A.R. 82-3-304 on behalf of the operator TGT 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 Ashley "A" #4  gas well on the grounds that said well:  (Check one)  is a coalbed methane producer is a 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.  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: 3-14-12  Signature: Butterington | I declare un     | der penalty of perjury under the laws of the state of Kansas that I am authorized to request |
|--|------------------|--|
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| Signature: B. Lynn Herrington  B. President  | _                |  |
| B. Lynn/Herrington   | Date: 3-14-12    |  |
|  |                  | B. Lynn/Herrington   |
| Màn  |                  | RECEI MAR 1 5  |

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.