KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:			'(See Instructi	ions on Rev	verse Side)				
Op	en Flow			Test Date	e:			API I	No. 15			
De	liverabilty			5-22-	12			15-0	075-20683	-00-00		
Company Horseshoe Operating, Inc.						Lease Livings	Lease Livingston			4	Well Number	
County Location Hamilton 70' E of N/2 SE			Section 8			TWP 23S		RNG (E/W) 40W		Acres Attributed 480		
Field Bradshaw			Reservoi Winfiel					nering Conne idstream				
Completion Date 12-17-1988				Plug Bac 2579	k Total Dept	h	Packer Set at		et at			
Casing Size Weight 4.5 10.5			Internal Diameter 4.052		Set at 2598		Perforations 2547		то 2562			
Tubing Size Weight 2.375 4.7			internal [1.995	Internal Diameter 1.995		Set at 2520		Perforations		То		
Type Completion (Describe) Single gas				Type Flui Water	d Production	1	Pump Unit or Traveling F Yes					
Producing Thru (Annulus / Tubing) Casing				% C	arbon Dioxid	ie	% Nitrogen 27.232		A .	Gas Gravity - G _g 7.68		
Vertical D	epth(H)		en e		Press Flang	sure Taps	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(Meter	Run) (Prover) Size	
	Buildup:	Shut in	5-21 2	0 12at_	7:44	(AM)(PM) Taken 5-22 20/2			12 at 7:4	14. (AM)(PM)		
Well on L										at	_	
	14				OBSERVE	D SURFACI	E DATA			Duration of Shut	t-in <u>24</u> Hours	
Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter Prover Press		Flowing Temperature t	Well Head Temperature t	Casing: Wellhead Pressure (P_w) or (P_t) or (P_c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	.150	psig (Pm)	Inches H ₂ 0	`		psig	59	psig	psia	24		
Flow	1/0-											
		<u> </u>	L <u></u>	1	FLOW STR	EAM ATTR	IBUTES	1				
Plate Coeffieci (F _b) (F	ent) Pro	Circle one: Meter or over Pressure	Press Extension √P _m xh	Grav Fac	or Temperature Factor		Dev Fa	Deviation N Factor Far		GOR (Cubic F Barre	eet/ Fluid Gravity	
Mcfd		psia			<u> </u>	F _{(t}					" G _m	
	l.,'	14		<u>· 1 . '</u>	OW) (DELIVI	ERABILITY) CALCUL	ATIONS)2= 0.207	
° _c)² =	 :	(P _w) ² =	Choose formula 1 or 2	P _d =		T	P _c - 14.4) +		· ·	(P _a) ² =	
(P _c) ² - (F or (P _c) ² - (F		P _c) ² - (P _w) ²	1. P _c ² -P _a ² 2. P _c ² -P _d ² divided by: P _c ² -P _d ²	1. P _c ² -P _a ² LOG of formula 2. P _c ² -P _d ² 1. or 2. and divide		Backpressure Curve Slope = "n"or Assigned Standard Slope		n x LOG		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
			<u> </u>									
Open Flow Mcfd @ 14.65 ps			65 psia	a Deliverability		oility	Mcfd @ 14.65 psia					
The	indersione	d authority o			tates that he			to make th	e above reno	rt and that he h	as knowledge of	
			aid report is true				9	day of	Juli	1	, 20 12.	
		Witness (if any)		· .	-		Janu	ice K	ipley	- RECEIVE	
		For Comm						<i>V</i>	Chec	ked by	JUL 13 71	
										Į.	JUL 13 20 KCC WICHI	
											MICH	

exempl and that correct of equip	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator Horseshoe Operating, Inc. at the foregoing pressure information and statements contained on this application form are true and to the best of my knowledge and belief based upon available production summaries and lease records oment installation and/or upon type of completion or upon use being made of the gas well herein named. Breby request a one-year exemption from open flow testing for the Livingston #4
	(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 ther agree to supply to the best of my ability any and all supporting documents deemed by Commission necessary to corroborate this claim for exemption from testing.
Date:	9-9-12 Signature: Janice Ripley Title: Production Assistant

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.