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

Type Test	i:					(	See instru	uctic	ons on Re	verse S	ide,	)							
Open Flow				Test Date:						API No. 15									
Deliverability				4/20/12						175-21,157-00-01									
Company Oil Produ		,Inc.	of Kansas						Lease Boles							1-16	Well Nu	ımber	
County Location Seward 660'FSL&4623'FEL				Section 16			TWP 35S			RNG (E/W) 34W				Acres Attributed					
Fleld	A_	/.	٠		·,	Reservoir	r /Chester					Gas Gat Oneok	hering	Conn	ection	1			
Completion Date				-	k Total De	1			Packer S	et at			··		· <del></del>				
2/12/91			***			6436	<b></b>					6350					- · — -		
Casing Size Weight 4.5				Internal Diameter			Set at 6487			632	ration: 5	<b>S</b>	то 6399						
Tubing Size Weight 2.375				Internal Diameter			Set at 6346			Perforations				То					
Type Completion (Describe) Commingled (Gas)				Type Fluid Production						Pump Unit or Traveling Plunger? yes-pump unit				ger? Yes	/ No				
Producing Thru (Annulus / Tubing)				% C	% Carbon Dioxide									Gas Gr	Gas Gravity - G				
annulus	<b>;</b>																	•	
Vertical D	epth(H	1)				•	Pre	essu	ure Taps							(Meter	Aun) (P	rover) Size	
Pressure	Buildu	ıp:	Shut in	9	2	12 at 1	1:45AM	_ (	(AM) (PM)	Taken_	4/2	20		20	12	at11:45/	AM	(AM) (PM)	
Well on L	ine:	;	Started		20	) at	<del></del>	_ (	(AM) (PM)	Taken_		-		20		at		(AM) (PM)	
							OBSERV	/ED	SURFACI	E DATA					Dura	tion of Shut-	in 24	Hours	
Static / Orif Dynamic Siz		Z0 Prover Press		Pressure		Flowing	Well Head	<u>.                                      </u>	Casing			Tubing				Liquid Produced			
				ure	Differential In	Temperature t	Temperatu t	re	Wellhead Pressure (P_) or (P <sub>1</sub> ) or (P <sub>2</sub> )			Wellhead Pressure (P_) or (P <sub> </sub> ) or (P <sub>e</sub> )		Duration (Hours)		(Barrels)			
Property	(Inch	nes) psig (Pm		4	Inches H <sub>2</sub> 0		<u>'</u>	寸	psig psia			psig psla							
Shut-In	ıt-In								152.8	167.2				24					
Flow								$\perp$											
							FLOW ST	TRE	AM ATTR	IBUTES	<u> </u>								
Plate Coefficient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or Prover Pressure psia		1	Press	Gravity		Flowing		)avl	viation Motered Fig		ered Flo	ow GOR		Flowing			
					Extension	Fac	tor	Te	mperature Factor		Fac	ctor	A		(Cubic Fe			Fluid Gravity	
					<b>√</b> P <sub>m</sub> xh	F,	·		Fn		F,		(Mcld)			Barrel)		G. G.	
		•				(OPEN FL	OW) (DEL	IVE	RABILITY	) CALC	UL	ATIONS				(p.)	² = 0.2	207	
(P <sub>e</sub> ) <sup>2</sup> =		<b>_</b> :	(P <sub>w</sub> ) <sup>2</sup> :		:	P <sub>d</sub> =		_%	(F	14,4	) +	14.4 =		:		(P <sub>d</sub> )			
/O.32 (F			/5		se formula 1 or 2:	LOG of	<u> </u>	1		ssure Cu	rve		Г	٠ ٦			0	pen Flow	
(P <sub>a</sub> )* - (P <sub>a</sub> )*		(P <sub>a</sub> )² - (P <sub>a</sub> )²		1, P.2-P.2		formula		Sli		pe ≖ "n" - or		n x LOG				Antilog	Def	iverability	
(P <sub>a</sub> )2 - (P <sub>d</sub> )2				2	d by: P.2 - P2	1. or 2. and divide p 2 p		Assigned Standard Slope							.			Equals R x Antilog (Mcfd)	
	_			- WHO C	ωυ <sub>γ.</sub> ι ε <sup>- ι</sup> <sub>w</sub>			_	<u> </u>		_	+		<del></del>					
							<u> </u>					-							
Open Flo	w			ı	Mcfd @ 14.0	65 psia			Deliverab	ility					Mcfd	<b>@</b> 14.65 psi	ia		
The u	unders	ignec	authority, c	n be	half of the	Company, s	itates that	he	is duly au	ithorized	d to	make th	ne abo	ve repo	ort and	d that he ha	ıs know	ledge of	
the facts st	tated t	harei	n, and that s	aid r	eport is true	and correc	t. Execute	ed ti	his the 20	Oth		day of A	pril _					20 12	
			,	·		oomoo		J-J- 11			_ `					<u>' ' /</u>			
			Witness	if any)					ي.		_			Fort	Compan		R	FCENTE	
				-					_					<u>G</u>	N	1 inc.	· \		
			For Coma	nissior	1					-				Che	cked by		M	AY 15 20	

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	re under penalty of perjury under the laws of the state of Kansas that I am authorized to request us under Rule K.A.R. 82-3-304 on behalf of the operator Oil Producers,Inc. of Kansas
	e foregoing pressure information and statements contained on this application form are true and
correct to th	ne best of my knowledge and belief based upon available production summaries and lease records
of equipme	nt installation and/or upon type of completion or upon use being made of the gas well herein named.
l hereby	y request a one-year exemption from open flow testing for the BOLES 1-16
	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 not capable of producing at a daily rate in excess of 250 mcf/D
I furthe	r agree to supply to the best of my ability any and all supporting documents deemed by Commission
	essary to corroborate this claim for exemption from testing.
	,
D-4 4/20/	112
Date: 4/20/	12
	Signature: 72
	Title: <u>C.D.O.</u>

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.

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MAY 1 5 2012

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