KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:		NI SIABILIZ	(See Instruc				RABILIT	YIEST	•
✓ Open Flow✓ Deliverability		Test ·Da	: 2211	၁			No. 15 21427-00- 0	ın	
Company REDLAND RESOUR	CES, INC.	<u> </u>	lad I	Lease OASIS	 		21427-00-0		Well Number
County COMANCHE	Location NE/4	Section 32	,	TWP 32S		RNG (E/V	V)		Acres Attributed
Field SHIMER		Reservo OSWE	ir GO LIME			Gas Gath ONEOK	ering Conne	ction ·	
Completion Date 05/28/05		Plug Bac 5492'	ck Total Dep	th		Packer Se 4775'			
Casing Size 4.5"	Weight 10.50#	Internal (4.052"	Diameter	Set (515		Perfora 4834		To 4843'	*
Tubing Size	Weight 4.7#	1.995"	Diameter	Set 4 477		Perfore	tions	То	
Type Completion (Descri	•	•••	d Production ENSATE			Pump Unit	or Traveling	Plunger? Yes	/ No
Producing Thru (Annulus UBING	s / Tubing)	% C	Carbon Dioxid	de		% Nitroger	1	Gas Gra	avity - G _g
/ertical Depth(H)			Press	sure Taps	-		Alt.	(Meter F	Run) (Prover) Size
Pressure Buildup: Shut	in <u>08 23</u>	2 20 1 7 at 1	:30	(AM) (PM)	Taken C	0812	3 20 1	Zat 1:30	(AM) (PM)
							20 _	at	
Static / Orifice ynamic Size roperty (inches)	Size Meter Differential		Flowing Well Head Temperature t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Pressure	Duration of Shut-i Duration (Hours)	Liquid Produced (Barrels)
Shut-In .	To the state of th			psig	psia '	400	psia	•	
Flow									
Plate Circle o	ne:		FLOW STRE		BUTES	·		·	
Coefficient Meter (F _b) (F _p) Prover Pro Mcfd psie	essure P	sion Facto	or Te	Flowing emperature Factor F _{tt}	Devia Fact F _p ,	or	Metered Flow R (Mcfd)	GOR (Cubic Fee Barrel)	Flowing Fluid Gravity G_m
	<u></u>	(OPEN FLO	W) (DELIVE	RARII ITVI	CALCINA	TIONS			
)2 =:	(P _w) ² = Choose formul	_: P _d = _	%		14.4) + 1			(P _a) ² (P _d) ²	= 0.207 =
$(P_c)^2 - (P_d)^2$ $(P_c)^2 - (P_d)^2$		P 2 LOG of formula P 2 1. or 2.	P _c ² - P _w ²	Slope (Assi	sure Curve e = "n" origned rd Slope	n x LO	a []	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
en Flow	Mofd @	14.65 psia		Deliverabil	itv	<u> </u>		ofd @ 14.65 psia	
The undersigned authoracts stated therein, and	ority, on behalf of	the Company, sta	ntes that he	is duly auti	horized to	make the a		and that he has	knowledge of IZCECEIVED
	Vitness (if any)						For Com		
F	or Commission						Checked	CONSI	ERVATION DIVISION WICHITA, KS

I declare under penalty of 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 REDLAND RESOURCES, INC. 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 OASIS #32-1 gas well on the grounds that said well: (Check one) is a coalbed methane producer
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 OASIS #32-1 gas well on the grounds that said well:
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 OASIS #32-1 gas well on the grounds that said well: (Check one)
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 OASIS #32-1 gas well on the grounds that said well: (Check one)
I hereby request a one-year exemption from open flow testing for the OASIS #32-1 gas well on the grounds that said well: (Check one)
gas well on the grounds that said well: (Check one)
is a coalbed methane producer
The state of the s
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 further agree to supply to the best of my ability any and all supporting documents deemed by Commiss staff as necessary to corroborate this claim for exemption from testing.
Date: 08 27 12
Signature:

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.