KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				(S	ee Instructio	ns on Hev	9150 3100/					
	n Flow erabilty		a	Test Date:	2			API No 15-07	o. 15 '5-20682 - 4	1001		
Company	·			7870		Lease HCU					Well Number	
Horseshoe	e Opera	Locatio	'n	Section		TWP		RNG (E/W)	,	Acres Attributed	
County Hamilton		C SE	'''	8		23s		41w				
			Reservoir Chase(Towanda)				Oneok Fi	ering Conne eld Service	ction 9S			
Completion	Date			Plug Back 2810'	Total Depth	1		Packer Set	t at			
10/27/98		141		Internal D	iameter	Set a		Perfora	tions	То		
4-1/2"	Casing Size Weight			4.090"		2850'		2506'		2580'		
Tubing Size	ing Size Weight		Internal Diameter 1.995		Set at 2363'		Perforations			То		
Type Comp	oletion (l	Describe)			Production		·	Pump Unit Pump	or Traveling	Plunger? Yes Ye	/ No S	
Single G				Gas - V	vater arbon Dioxid	10		% Nitroger	n		avity - G	
-	Thru (A	nnulus / Tubing)	% C	ardon Dioxic	i o		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.78		
Annulus Vertical De	epth(H)				Press	sure Taps				,	Run) (Prover) Size	
2567'					Flang	ge				2.068		
Pressure B	Buildup:	Shut in	7-17 20,	12 at /	1:50	(AN) (PM)	Taken	<u>7-18</u>	20,	/2 at //:.	50 (AM) (PM)	
Well on Lin	ne:	Started	20	at		(AM) (PM)	Taken		20	at	(AM) (PM)	
					OBSERVE	D SURFAC	E DATA			Duration of Shut	-in_24_Hours	
		Circle one:	Pressure			Cas		Tu	ibing	,		
Static / Dynamic	Orifice Size	Meter	Differential	Flowing Temperature	Well Head Temperature	Weilhead (P,,) or (F			d Pressure (P _L) or (P _c)		Liquid Produced (Barrels)	
Property	(inches) Prover Pressu psig (Pm)		in Inches H ₂ 0	t	t	psig	psia	psig	psia			
Shut-In							59.6			24_		
Flow												
L					FLOW STE	REAM ATTE	IBUTES					
Plate Coefficient $(F_b)(F_p)$		Circle one: Meter or Prover Pressure	Press Extension ✓ P _m xh	Gra Fac	tor	Flowing Temperature Factor F ₁₁		viation actor F _{pv}	Metered Flo R · (Mcfd)	w GOF (Cubic F Barre	eet/ Fluid Gravity	
Mcfd		psia	in .			<u>'''</u>						
L		is:		(OPEN FL	.OW) (DELIV						a) ² = 0.207	
(P _c) ² =		: (P _w) ² =		P _d =	·	% (P _c - 14.4) -	+ 14.4 =	:	(P)	g) ² =	
(P _c) ² - (F	P _a) ²	(P _o) ² - (P _w) ²	1. P _c ² - P _a ² 2. P _c ² - P _d ²	LOG of formula 1. or 2.		Sie	essure Curv ope = "n" or ssigned	nxl	.og	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
(P _c) ² - (F	d)*		divided by: P _c ² - P _w ²	and divide	P _c ² -P _w ²	Stan	dard Slope				(()	
						-		_				
			Mcfd @ 14.	65 nsia	•	Delivera	bility			Mcfd @ 14.65	osia	
Open Flor		ned authority,			states that			to make th	ne above rep	port and that he	has knowledge of	
			said report is true				8_	_ day of	Occo	·	RECENT	
								Janic	e Ki	ply	-0LIVE	
	_ -	Witness	(if any)				/	7	Fo	Company	UCT 1 1 or	

and that the fore	der penalty of perjury under the laws of the state of Kansas that I am authorized to request der Rule K.A.R. 82-3-304 on behalf of the operator Horseshoe Operating, Inc. going pressure information and statements contained on this application form are true and t of my knowledge and belief based upon available production summaries and lease records allation and/or upon type of completion or upon use being made of the gas well herein named.
r nereby redu	est a one-year exemption from open flow testing for the HCU 0831-B
gas well on the gr	ounds that said well:
(Check ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	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 to supply to the best of my ability any and all supporting documents deemed by Commission to corroborate this claim for exemption from testing.
Date: <u>/0-8-</u> /	<u> </u>
~	Signature: <u>Janice Ripley</u> Title: <u>Production Assistant</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.