KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Rev	erse Side)				
Open Flow					.								
✓ Deliverabilty					Test Date 4/9/201					No. 15)23-20162 -	0-00	0	
Company LOBO PRODUCTION, INC.				Lease ADAMS-MCAT				TEE			١	Well Number 2-20	
County CHEYE	ENNE		Location SW NE		Section 20		TWP 4S		RNG (E/W) 41W			Acres Attributed	
Field BENKELMAN					Reservoir NIOBRARA					nering Conn		NC.	NOV 14 KCC WICH
Completion Date 11/11/80					Plug Bac 1378'	Plug Back Total Depti 1378'		Packer Set at		et at			NOV 14
Casing Size 4.5			Weigh 9.5#	nt	Internal Diameter		Set at 1413'		Perforations 1195'			то 1227'	ACC WICH
Tubing Size			Weigh	nt	Internal Diameter			Set at Perforati		ations	•	То	
Type Completion (D SINGLE GAS			escribe)		Type Fluid Production			Pump Unit or Traveling NO			Plunger?	Yes	/ No
Producing Thru (Annulus / Tubing) CASING				g)		arbon Dioxi	ide	e % Nitrogen				Gas Gra	evity - G _g
Vertical Depth(H)					Pressure Taps								Run) (Prover) Size TER RUN
Pressure Buildup:			Shut in 4/9	2	12 at 0	7:00	(AM) (PM)	Taken_4/	10	20			(AM) (PM)
Well on L	ine:	,	Started	2	0 at		(AM) (PM)	Taken		20	at	·	(AM) (PM)
						OBSERVE	D SURFACE	DATA			Duration o	of Shut-i	24.33 Hours
Static / Dynamic Property	Orific Size (inche	•	Circle one: Meter Prover Presso psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Well Hea Temperature t t		Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Durati (Hour	ion	Liquid Produced (Barrels)
Shut-In			P-15 (,	110100 1120			psig 100	psia	psig	psia		· · · · · · · · · · · · · · · · · · ·	
Flow													
						FLOW STR	REAM ATTRI	BUTES					
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Mater or Prover Pressure psia		Press Extension	Grav Fact F _s	tor	Temperature Fa		iation Metered Flow ctor R (Mcfd)		GOR (Cubic Feet Barrel)		Flowing Fluid Gravity G _m
				<u> </u>	(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS	···································		(P)2	= 0.207
(P _c) ² =		_:	(P _w) ² =	<u></u> :	P _d =		% (P _c	- 14.4) +	14.4 =	;		(P _d) ²	
$(P_{c})^{2} \cdot (P_{s})^{2}$ or $(P_{c})^{2} \cdot (P_{d})^{2}$		(P _c) ² - (P _w) ²		Choose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide D 2 D		Backpressure Curve Slope = "n" or Assigned Standard Slope		n x 10G		Antilo	Open Flow Deliverability Equals R x Antil (Mcfd)	
-									-				
Open Flow Mcfd @ 14						Deliverabil	Deliverability		Mcfd @ 1			1	
				n behalf of the						e above repo	rt and that	t he has	s knowledge of
			Witness (i	f any)			_		Such	and b	2. ompany	7/1	ll-

NOV 1 4 2012 KCC WICHITA

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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 LOBO PRODUCTION, 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 ADAMS-MCATEE 2-20
gas well on 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 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: 11/01/2012
Signature: Butand A. Miller
Title: OWNER/OPERATOR

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.