KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:			(See Instruct	tions on Rev	erse Side)			
□ Ор	en Flow			Test Date	٠.			ADI	No. 15		
Deliverabilty				11/20/12			AP! No. 15 15-077-20755 - 00 -0				
Company AGV Corp			А	Lease Hospital			Well Number 1			Well Number	
County Location Harper NW SW			Section 19		TWP 32	, , , , , , , , , , , , , , , , , , , 	RNG (E/W) 8 W		Acres Attributed		
Field Sullivan				Reservoir Stalnak			Gas Gath West W	ering Conne	ection	RECEIVA	
Completic 1981	on Date		Plug Back Total De 3700			h	Packer Set at				DEC 1 1 2 KCC WICHI
Casing Size W 5-1/2			ht Internal Diameter			Set at Perforations OH 3700			то 3707	KCC WICH	
Tubing Size Weight 2-3/8			ht	Internal [Diameter	Set at Perforations 3690		ations	То	****	
Type Completion (Describe) Single			Type Flui Water	Type Fluid Production Water			Pump Unit or Traveling Plunger? Yes / No Pumping Unit				
Producing Thru (Annulus / Tubing) Annulus			% C	% Carbon Dioxide			% Nitrogen Gas Gravity - G _o				
Vertical D					Pres	sure Taps				(Meter	Run) (Prover) Size
Pressure	Buildup:	Shut in11	/20	12 at		(AM) (PM)	Taken 11	/21	20	12 at	(AM) (PM)
Well on L	ine:	Started		at		(AM) (PM)	Taken		20	at	(AM) (PM)
					OBSERVE	D SURFACE	DATA			Duration of Shut	t-in 24 Hours
Static / Dynamic Property	namic Size Prov			Flowing Temperature t	Well Head Temperature t	Wellhead Proceure		Tubing Wellhead Pressure (P _w) or (P _r) or (P _c) psig psia		Duration (Hours)	Liquid Produced (Barrels)
Shut-In						35.9	pola	pag_	puic	24	
Flow]									
			<u> </u>	1	FLOW STR	EAM ATTRI	BUTES	———			
Plate Coefficeient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia	Press Extension P _m x h	Grav Fact F _c	· 1 7	Temperature F		ation Metered Flow ctor R (Mcfd)		GOR (Cubic Fo Barret	eet/ Fluid Gravity
		<u></u>									
P _c) ² =	:	(P_) ² =	= :	(OPEN FL		ERABILITY)	CALCUL - 14.4) +) ² = 0.207) ² =
(P _c) ² • (F or (P _c) ² • (F	2 _a) ²	(P _w) ² =	Chaose formula 1 or. 1. P _c ² -P _a ² 2. P _c ² -P _d ² divided by: P _c ² -P _d	LOG of formula 1. or 2.	P _c ² ·P _w ²	Backpress Slope Assi	sure Curve = "n" or igned rd Slope	n x Li	og [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
Open Flow Mcfd @ 14.65 psia						Deliverability Mcfd @ 14.65 psia					sia
			on behalf of the					make the		rt and that he ha	as knowledge of, 20 12
		Witness	(if any)	,		_	 	Ku	For Co	Mallu ompany	
		For Com:	mission	•		-			Chec	ked by	

	e under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt statu	s under Rule K.A.R. 82-3-304 on behalf of the operator AGV Corp.
and that the	foregoing pressure information and statements contained on this application form are true and
correct to the	e best of my knowledge and belief based upon available production summaries and lease records
of equipmen	t 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 Hospital #1
gas well on t	he grounds that said well:
(0	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
	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.
Date: <u>12/8/</u> 1	2
	Signature: Kent Kalunt
	Title: Lease Operations Manager

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.