KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Test:			(See Instruc	tions on Re	verse Side))					
Open Flow	olty 24km	1 1	Test Date 11/28/1					No. 15	00-00-			
Company American Warr	-	Shut in	11/26/1		Lease Koeme r		15-(<i>ii i</i> - 10 133 "	#3	Well Num	ber	
County Harper		Location C-NW-SE		Section 7		TWP 32S		RNG (E/W) 9W		Acres Attributed		
ield Sharon			Reservoir Mississippian				Gas Gathering Connection Pioneer		ection	DEC 1 2 :		
Completion Date 12/20/57			Plug Back Total Depth 4325'				Packer Set at			D	EC 12	
Casing Size	Weight 15.5		Internal Diameter 4.950		Set at 4341'		Perforations 4318'		To 432 0	s' KCC	WICH	
ubing Size 23/8	-		Internal Diameter 1.995		Set at 4322 '		Perforations		То			
Type Completion Bas & oil	(Describe)			d Production tion water			Pump Un Pumpii	it or Traveling ng unit	Plunger? Ye	s / No		
Producing Thru (Annulus	(Annulus / Tubin	ıg)	% C	Carbon Dioxi	de		% Nitroge			Gravity - G		
Vertical Depth(H))			Pres	sure Taps				(Mete	r Run) (Pro	ver) Size	
Pressure Buildup		/282								•	M) (PM)	
Well on Line:	Started	2i	u at		(AM) (PM)	raken		20	at		M) (PM)	
<u> </u>				OBSERVE	D SURFACE		T	Ŧ	Duration of Shi	_{ut-in} 24	Hours	
static / Orifice		Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)		Liquid Produced (Barrels)		
Shut-In					155	psia	parg	рыд				
Flow			- 1 •		50#							
		1	3	FLOW STR	EAM ATTRI	BUTES						
Plate Coefficient (F _b) (F _p) Motd Circle one: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Gravity Factor F _g		Temperature Factor		viation Metered Flow actor R F _{pv} (Mcfd)		GO (Cubic Barre	Feet/	Flowing Fluid Gravity G _m	
			(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS			. \2 - 0.20	,	
P _c) ² =	.: (P _w) ² =		_		% (P	- 14.4) +	14.4 =	:		$(2)^2 = 0.207$ $(3)^2 = $	<u></u>	
$ \begin{array}{c cccc} (P_c)^2 - (P_a)^2 & & & Choose formula 1 or \\ & & & & & & & \\ & & & & & & \\ & & & & & & \\ & & & & & & \\ & & & & & & \\ & & & & & & \\ & & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & &$		LOG of formuta 1. or 2. and divide p 2 p 2		Backpressure Curve Slope = "n" Assigned Standard Slope		n x tOG		Antilog	Delive Equals F	Open Flow Deliverability Equals R x Antilog (Mcfd)		
				·								
Open Flow	Mcfd @ 14.65 psia					Deliverability Mcfd			/lcfd @ 14.65 p	0 14.65 psia		
		n behalf of the	Company, s	states that h	e is duly au	thorized to	_		t and that he		•	
	gned authority, o				_							
			and correc	t. Executed	this the 5		day of De	cember		, 20	. <u>12</u>	
The undersigne facts stated the		aid report is true	and correc	t. Executed	this the 5		day of De	nea	ompany	, 20	12	

	KCC WICHITA					
I declare under penalty of perjury under the laws of the s	•					
exempt status under Rule K.A.R. 82-3-304 on behalf of the oper						
and that the foregoing pressure information and statements	• •					
correct to the best of my knowledge and belief based upon ava	•					
of equipment installation and/or upon type of completion or upo	•					
I hereby request a one-year exemption from open flow test	ing for the Koerner #3					
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 app	• •					
is not capable of producing at a daily rate in						
<u> </u>						
I further agree to supply to the best of my ability any and a	all supporting documents deemed by Commission					
staff as necessary to corroborate this claim for exemption from						
Data: 12/5/12						
Date: 12/5/12						
a —						
Signature:	1,20					
Title: Forema	an					

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.