## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:			(	See Instructi	ions on Reve	rse Side	))			
= '	en Flow liverabil			2-/3-	73				No. 15 <b>075-2074</b> 7	-0000	
Company Horseshoe Operating, Inc.				9701	Lease Buck			Well Number 2-3			
County Location Hamilton W/2			Section 3		TWP 23S		RNG (E/W)		Acres Attributed		
Field Bradshaw			·	Reservoi	r		Gas Gathering Co DCP Midstre				
Completion Date 4-27-2001			-	Plug Bac 2628	h	Packer Set at		Set at			
Casing Size W			ght Internal Dia 5 4.052		Diameter	neter Set at 2628		Perforations 2601		το <b>2609</b>	
Tubing Size W 2-3/8 4.			ight	nt Internal Diameter 2.000		Set at <b>2615</b>		Perforations		То	
Type Completion (Describe) Single-Gas				Type Flui <b>Water</b>	d Production	Pun			ump Unit		/ No
Producing Thru (Annulus / Tubing)				% C	arbon Dioxid	de	% Nitrogen		en	Gas Gravity - G	
Vertical D						sure Taps				·	Run) (Prover) Size
Pressure Well on Li			2-12							<u>/3</u> <sub>at</sub>	(AM) (PM)
· · · · · ·		<del></del>			OBSERVE	D SURFACE	DATA		<u></u>	Duration of Shut	-in <u>24</u> Hours
Static / Dynamic Property	Orific Size (Inche	Prover Pre	r Differential	Temperature	Temperature Temperature		Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Tubing. ead Pressure r (P <sub>t</sub> ) or (P <sub>c</sub> )	Duration (Hours)	Liquid Produced (Barrels)
Shut-In	.50		m) Inches H <sub>2</sub> 0		80		psia	psig psia		24	
Flow											
			·		FLOW STR	EAM ATTRIE	UTES				
Plate Coefficient (F <sub>p</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or Prover Pressure psia	Press Extension	Extension Factor		Flowing Tamperature Factor F <sub>II</sub>		Factor R (Mcfd)		(Cubic F	eet/ Fluid Gravity
<del>-</del>											
P <sub>c</sub> )² =		: (P <sub>w</sub> )	²=:	(OPEN FL		ERABILITY) (P <sub>e</sub>		LATIONS 14.4 =	·:		) <sup>2</sup> = 0.207 ) <sup>2</sup> =
(P <sub>c</sub> ) <sup>2</sup> - (F or (P <sub>c</sub> ) <sup>2</sup> - (F	2 <sub>g</sub> ) <sup>2</sup>	(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Choose formula 1 or  1. P <sub>c</sub> <sup>2</sup> - P <sub>a</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> - P <sub>d</sub>	LOG of formula 1, or 2, and divide		1	gned pr	l n x	LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
Open Flow Mcfd @ 14.65			.65 psia	j psia		Deliverability		Mcfd @ 14.65 psia			
			on behalf of the	•	•		horized 12	to make t	he above repo	ort and that he h	nas knowledge of
·- · · · · · · · · · · · · · · · · · ·		Wither	ss (if arry)			_		jaan.	Fire	Ampany L	CC WICH
	<del></del>	For Co	mmlssion		·			·	Che	cked by	CO WICH

JUN 19 2013

	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request						
	t status under Rule K.A.R. 82-3-304 on behalf of the operator Horseshoe Operating, Inc.						
	at the foregoing pressure information and statements contained on this application form are true and						
	to the best of my knowledge and belief based upon available production summaries and lease records						
	pment installation and/or upon type of completion or upon use being made of the gas well herein named. ereby request a one-year exemption from open flow testing for the <a href="Buck 2-3">Buck 2-3</a>						
	If 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							
l fu	rther agree to supply to the best of my ability any and all supporting documents deemed by Commissio						
staff as	necessary to corroborate this claim for exemption from testing.						
Date:	6-12-13						
	Signature: Anice Ripley  Title: Production Assistant						

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.