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

Type Tes	st:					(See Instruc	ctions on Re	verse Sid	e)			
Open Flow Deliverability			2-13-13			API No. 15 15-071-20040 <b>- 4000</b>						
Compan Horsesi		erating, Inc			<i>o, 10</i>	<i>,</i> —	Lease Beard		•		1	Well Number
County Greeley	•		1	Section 36		TWP 20S		RNG (E/W) 41W			Acres Attributed	
rield Bradshaw			Reservo L. WInf		,			thering Conn lidstream	ection			
Completion Date 3/19/73			Plug Bar 2798	ck Total Dep	oth	Packer Set at None						
asing S .5"	sing Size Weight " 9.5			Internal Diameter		Set at 2829		Perforations 2770		то 2775		
ubing Size Weight			Internal	Diameter	Set at <b>2748</b>		Perforations		То			
Type Completion (Describe) Single Gas				Type Flu Water	id Productio	n		Pump U Yes	nit or Traveling	Plunger? Yes / No		
roducin nnulu:	_	Annulus / Tu	bing)		% (	Carbon Dioxi	ide		% Nitrog	jen	Gas 0	Gravity - G <sub>g</sub>
ertical [	epth(H)					Pres	sure Taps				(Meter	r Run) (Prover) Size
		: Shut in		2-12 2							13 at 8.	
/ell on L	ine:	Started		20	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
itatic /	Orifice Size (inches	Meter Prover Pressure		Pressure Differential in	Flowing Well Head Temperature Temperature		J. Wollhood Proceuro		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Duration of Shu  Duration  (Hours)	Liquid Produced (Barrels)
roperty Shut-In	. 50	psig (P	m)	Inches H <sub>2</sub> 0	t	t	psig 80	psia	psig	psia	24	
Flow	100				·							
					<u> </u>	FLOW STR	EAM ATTRI	BUTES				
Plate Coeffieci (F <sub>b</sub> ) (F Mcfd		Circle one:  Meter or  Prover Pressure  psia		Press Extension P <sub>m</sub> x h	Grav Fact	tor Temperature		Deviation Factor F <sub>pv</sub>		Metered Flow R (Mcfd)	GOR (Cubic F Barrel	eet/ Fluid
)² =		: (P <sub>w</sub> )		:	(OPEN FLO	OW) (DELIVI	ERABILITY)	CALCUL - 14.4) +		:		) <sup>2</sup> = 0.207 ) <sup>2</sup> =
(P <sub>c</sub> )²- (F or (P <sub>c</sub> )²- (P	·	(P <sub>o</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>		Choose formula 1 or 2:  1. P <sub>2</sub> <sup>2</sup> -P <sub>3</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>w</sub> <sup>2</sup> LOG of formula 1. or 2. and divide by: by:		P2. P2 A		ssure Curve pe = "n" ror signed ard Slope		n x LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
en Flow	,			Mcfd @ 14.6	5 psia		Deliverabili	ty		N	lcfd @ 14.65 ps	ia
		ein, and that	said r	eport is true			1	2	make the	e above report	and that he ha	kCC WICHI
		Witnes	s (if any)	)				1		F# Co	mpany	JUN 19 2013
		For Cor	nmissior	)						Check	ed by	RECEIVED

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 Horseshoe Operating, 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 Beard #1
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: 6-12-13
Signature:

## 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.