Form G-2 (Rev 8/98)

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

(See Instructions on Reverse Side)

Type Test:						100	0 1170				4.44 ,						
	Open Flow				Test Date: 11/10/12							API No. 15-095-006			-0000		
Deliverability WHSIP						Test Date.	1 17	10/12					ATTIO.	15-655-66655 - 6565			
Company				L					ease					Well Number			
LINN OPERATING										WSU 17 BOYLE I						2	
County			Location C SW SW I			Section	26		WP			RNG (EW) 8W				cres Attributed 40	
			Reserve					30S		Gas Gathering Cor							
Field SPIVEY-GRABS-BASIL													EXPLORATION, LLC.				
Completion	n Date				Plu	Back Total	Dept	h				Packe	Set at				
	/11/55					4429							Df			·····	
Casing Size 5 1/2"			Weight 14#		Inte	rnal Diamete 5.012	r	Set at 4449					Perforations 435		To 4368		
			Weight		Inte	rnal Diamete						Perforations			То		
2 1																	
Type Completion (Describe)			cribe)	Type Fluid Production								Pump	Unit or Trave		nger?	Yes / No	
SINGLE Producing Thru (Annul			ha (Tubina)		9/0	OIL arbon Dioxide						% Nitre	PUN	MP YES Gas Gravity - G.			
Producing	Annul		ius/ i ubing)		%C	arbon Dioxid	е					76 IVIU	ogen		(sas	s (±ravity - (±.	
Vertical De	epth (H)						Pre	ssure Ta							(Meter F	Run) (Prover) Size	
44	50							FLANG	BE								
Pressure Buildup:			Shut In		11/9 20 <u>12</u>		9:	<u>45</u> (A	(AM) (PM)		Taken	11/1	020	<u>12</u> at	9:45	_ (AM) (PM)	
Well on line:			Started		20 at				AM)(PM)		Taken	20		at		_ (AM)(PM)	
							ОВ	SERVED	SURF	ACE	DATA	_		Duration	of Shut-	ln 24.00	
Static/	Orifi	Circle Orifice Met		e:	Pressure Differential	Flowing	14	ell Head	Casing d Wellhead Pressure			Tubing Wellhead Pressure		Duration		Liquid Produced	
Dynamic Size Property (Inches)				sure	in	Temperature		perature			1) or (P _C)	(P _w) or (P ₁) or (P _c)		1	(Hours)	(Вапеls)	
		es)	psig		Inches H ₂ 0	t		t	psig		psia	psig	psia				
Shut-In	ihut-In								90	0.0 104.4		pump	pump		4.00		
Flow	Flow																
<u> </u>	1				I		FLO'	W STRE	AM AT	TRIBL	JTES	•		1			
Plate			cle one:		Press.	Gravity		Flow						0.0			
1		Meter or Prover Pressure		Extension		Factor F _g		Tempe Fac		E	Deviation Factor	Metered Flow R		GOR (Cubic Feet/		Flowing Fluid	
			psia	√P _m x H _w		,		F,	ft		Fpv	(Mcfd)		Barrel)		Gravity	
																G _m	
ļ				<u> </u>	· · · · · · · · · · · · · · · · · · ·	(OPEN FLO	OW)	DELIVE	RABILI	TY) C	ALCULAT	IONS		<u> </u>		<u> </u>	
						,				•					$(P_n)^2 =$	0.207	
(P _c) ² =		(P	ພ) ² =		: P _d =		_%		(P _c - 1	4.4) +	· 14.4 =		<u></u> :		(P _d) ² =		
$(P_c)^2 - (P_a)^2$		(P _c) ² - (P _w) ²		P _c ² • P _a ²		Г		٦١	Backpressure Curve		Curve		_			Open Flow	
(F _c) - (F _a)		(Pc) - (Pw)				LOG of	_		Slope = "n"		n"	nxLOG		Ant	ilog	Deliverability	
				$(P_c)^2 - (P_w)^2$		formula [1. or 2.	P _c ² - F	w	or Assianed							Equals R x Antilog (Mcfd)	
						and divide_		- 11	Standard Slope				L.			(Word)	
	+		. ,			bγ			 					+			
	-			-		-							·	 			
	,			<u> </u>								<u>. </u>					
Open Flov	V			Mcfc	d @ 14.65 ps	ia		D	eliverat	oility			Mcfo	0 14.6	5 psia		
The u	ndersia	ned	authority, o	n beh	alf of the Co	npany, states	that	he is du	ily autho	orized	to make th	ne above i	eport and th	at he has	knowled	ge of the facts	
stated the	rein, an	d tha	at said repo	rt is tr	ue and corre	ct. Executed	this	the	11th	<u>1</u>	day of	Neven	nber /\		201	2	
										(,	~ わ	· +	in Dece	W			
			Witi	ness (i	f any)								For Som	oany			
			En-	Comm	ilssion				_				Checked	Thy			
			FUL	COHIIT	noolUH								CHECKEL	a Uy			

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 LINN OPERATING, INC.
and that the foregoing information and statements contained in 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 WSU 17 BOYLE I 2
testing for the 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: 11/11/2012
Signature 1 DES Marrie
Signature
Title: Regulatory Specialist
Signature: L. R. Han forw

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 measued 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 from 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. it was a verified report of test results.