**RECEIVED** 

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

	t: en Flow liverabilty				Jest Date		tructions on Re	verse Sid	ÁPI	No. 15			
Company			<del> </del>		5-22	/3	Lease		075	-20145 <b>— 0</b> 0	200	Well Number	
		ating, Inc.					Henry				1	weii Number	
County Location Hamilton SW/4			Section 15		TWP 23\$			W)		Acres Attributed			
Field Bradshaw				Reservoi Winfield		· · · · · ·			nering Conne i <b>dstream</b>	ection			
Completion Date 4-9-76					Plug Bac 2562'	Plug Back Total Depth 2562'				et at		tige The property of the same	
Casing S 4.5	Casing Size Weight .5 10.5			Internal ( 4.052	Diameter		Set at <b>2570'</b>		Perforations 2486'		To <b>2496'</b>		
Tubing Si 2-3/8	ubing Size Weight 2-3/8 4.7			Internal E 2.000	Diameter		Set at Pe 2508'		ations	То			
Type Completion (Describe) Single - Gas				Type Flui Water	Type Fluid Production Water				Pump Unit or Traveling Plunger? Yes / No Pump Unit - Rod				
Producing Thru (Annulus / Tubing)					% C	arbon D	loxide		% Nitrogen Gas Gravity - G				
Annulus	<b>;</b>											•	
Vertical Depth(H)						Pressure Taps Flange					(Meter	Run) (Prover) Size	
Pressure Buildup: Shut in 5-21 20					o/3 <sub>at</sub> _	10:12	2 (AM) (PM)	Taken	5-22 201		13 at 10:1	2 (A)H) (PM)	
Well on L	ine:	Started	<del></del>	20	O at		(AM) (PM)	Taken	<del> </del>	20	at	(AM) (PM)	
<del></del>	<del></del>					OBSEF	RVED SURFAC	E DATA	· · · · · · · · · · · · · · · · · · ·		Duration of Shut-	in 24 Hours	
Static / Dynamic Property	Orifice Size (inches)	Circle one Meter Prover Pres	Diff	essure erential in	Flowing Temperature t	Well He Temperat	ad Wellhead			ubling ad Pressure (P <sub>1</sub> ) or (P <sub>c</sub> )	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	.625	psig (Prr	1) Inch	nes H <sub>2</sub> 0			psig	68.8	psig	psia	24		
Flow													
			J	- <u></u> -		FLOW 9	STREAM ATTR	IBUTES	<u> </u>				
Plate Coeffieci (F <sub>b</sub> ) (F <sub>b</sub> Mcfd	ent	Circle one: Meter or Prover Pressure psia		Press Extension ✓ P <sub>m</sub> x h		ity or	Flowing Temperature Factor F <sub>i</sub> ,	Deviation Factor F <sub>pv</sub>		Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	E Gravity	
<del></del>					-								
(P <sub>c</sub> )² =	:	(P <sub>w</sub> )²	=		•	OW) (DE	LIVERABILITY % (f	-	.ATIONS · 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> - (P		(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>		Choose formula 1 or 2: 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>			Backpressure Cun Slope = "n"		9 N 1 1 1 1 1		Antilog	Open Flow Deliverability Equals R x Antilog	
	d'	77	divided by:	P.2. P.2	and divide by:	P <sub>2</sub> - P <sub>2</sub> 2		ard Slope				(Mcfd)	
Open Flov	,		Mefe	d @ 14.6	35 psia	•	Deliverab	ility			√cfd @ 14.65 psi	a	
		ed authority,						クル	o make the	e above repor	t and that he ha	s knowledge of, 20	
<del></del>								$\mathcal{L}$	Janu	e Ky	Eleca	KCC WICH	
		Witness	(if any)					-		For	ompany /		
and the first of the state of t		For Com	mission			IA	_			Chec	ked by	JUN 2 6 20	

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 Henry #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.
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.