KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type les					(See In	structions on I	Reverse Sid	de)			
√ 0	pen Flow			Tool Da	4						
Deliverabilty Test Day 9-16-20								PI No. 15			
Compan Rakestr	y aw Bros	., LLC				Lease Handl	kins	15-	045-2	→ → → → 00	726 - 0000 Well Number
County Location Kingman 1650FNL330FEL			Section 28		TWP 29s		RNG (E/W) 7w			Acres Attributed	
Field			Reservo	oir		Gas Gathering Connection			nection		
Basil Completion Date			Miss.	ale Tabal	Death		Trenton			RECEIVE	
7-7-1958			4137	ck Total	Deptn	Packer Set at				MAA .	
asing S	sing Size Weight		Internal Diameter			Set at , 4257		orations	To		
ubing Size Weight		Internal Diameter			Set at		Perforations		*KCC WIC		
2 3/8" 4.7 ** Type Completion (Describe)		7"		95							
	le (G					action		Pump Unit or Traveling Plunger? (es) / No Pumping Unit			
oducin	Thru (A	nnulus / Tul	bing)		Carbon I			% Nitro	gen C	Unit Gas G	ravity - G
Ant	าบโบร								, -		, - -
ortical E	Pepth(H)				1	Pressure Taps				(Meter	Run) (Prover) Size
essure	Buildup:	Shut in _	-16	20 11 at 9):00 an	1 (AM) (PM) Taken 9	-17	20	11 at 9:00 a	im (AM) (PM)
ell on L	ine:	Started		20 at		(AM) (PM) Taken		20	at	(AM) (PM)
					OBSE	RVED SURFAC	CE DATA	****		Duration of Shut-	in How
tatic/	Orifice Circle on Meter		1	Flowing	Well He	eart i	Casing		Tubing	Julian of Charle	-in Hour
mamic operty	Size (inches)	Prover Pre	ssure in	Temperature t		ture Wellhead	d Pressure P _t) or (P _c)	1	ead Pressure or (P,) or (P,)	Duration (Hours)	Liquid Produced (Barrels)
		psig (Pi	m) inches H ₂ 0	<u> </u>	<u> </u>	psig	psia	psig	psia		(Duitely)
hut-In					<u> </u>	60#					
Flow		<u> </u>						•	•		
					FLOW S	STREAM ATT	RIBUTES			"	<u> </u>
Plate Coeffieci		Circle ane: Meter or	Press	Grav	/ity	Flowing		riation	Metered Flow	GOR	Flowing
(F _b) (F		over Pressure		Fac		Temperature Factor	Fa	ctor	R	(Cubic Fe	
Mcfd		psia	✓ P _m xh	F		F _{tt}	F	ρν	(Mcfd)	Barrei)	Gravity G_
				(OPEN FLO	OW) (DE	LIVERABILITY) CALCUL	ATIONS		/D.35	
) ² =	:	(P _w) ²	=:	P _d =		% (1	P _c - 14.4) +	14.4 =	:	(P _a) ²	² = 0.207 ² =
P _c)²- (P) ² ((P _c) ² - (P _w) ² 1. P _c				Backpressure		rve		Open Flow	
or P _c)²- (P		, c) (, m)	1. P _c ² -P _a ² 2. P _c ² -P _d ²	l mmila			Stope = "n"		.OG	Antilog	Deliverability
P _e)*- (P	.)*		divided by: P2-P2	and divide	P.2 - P.		signed ard Slope	-		J	Equals R x Antilog (Mcfd)
		****	•								(
											
en Flow Mcfd @ 14.65 psia						Deliverab		Mcfd @ 14.65 psia			
The ur	ndersigne	d authority,	on behalf of the	Company, st	lates tha	t he is duly au	thorized to	make the	e above report	and that he has	s knowledge of
			said report is true								, 20 <u>11</u>
		Witness	(if any)						For Co.	mpany	
		For Com	ımission			- <u>-</u>				-46	
									Check	ed by	

ACC WICHTIA
to the state of Manage that I am outhorized in required
I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt status under Rule KAR. 82-3-304 on behalf of the operator ZAKESTRAW BRES 4
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 hareby request a one-year exemption from open flow testing for the HANDKINS
I hareby request a one-year exemption from open now lessing or one
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 mcl/D
t 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: 12-29-12
Date: 12-01-12
Signature: <u>Forma</u> Sangae
Tild maica
Title:

Instructions: If a gas well meets one of the eligibility enteria 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-infoulklup time and shall be reported on the front side of this form under GBSERVED 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 daim of eligibility for exemption 65 denied.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichitz office no later than December 31 of the year for which it's inlended to acquire exampt status for the autijust well. The form must be signed and dated on the front side as though it was a varified report of annual test results.