KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type res	it.			(See msauci	dons on nev	5135 3106	÷)				
	pen Flow			Test Date	e: -				No. 15			
	eliverabilty 	<i>'</i>		7-/8-	13			15	-075-20602	20000	14/ 11/ 11	
Company Horseshoe Operating, Inc.				Lease Eldon					1	Well Number	ſ	
County Hamilton	County Location Hamilton NE/NE			Section 12		TWP , 23S		RNG (E/W) 41W			Acres Attribu	uted
Field Bradshaw				Reservoir Winfield			Gas Gathering Connection DCP Midstream					
Completion Date 6-23-1996			Plug Back Total Depth 2561				Packer					
Casing S 4.5	asing Size Weight .5 10.5			Internal Diameter 4.0000		Set at 2567		Perforations 2525		To 2534	то 2534	
Tubing S 2.375	oing Size Weight 4.7		ght	Internal Diameter 2.0000		Set at		Perforations		То	То	
Type Completion (Describe) Single gas			Type Fluid Production Water				Pump Unit or Traveling Plunger? Yes / No					
Producing Thru (Annulus / Tubing)			% Carbon Dioxide				% Nitrog	gen	Gas G	Gas Gravity - G _g		
Casing Vertical E	Depth(H)	···-·			Pres	sure Taps	i			(Meter	Run) (Prover) Size
2573					Flan	ge						,
Pressure	Buildup:	Shut in	7-17_2	0/3at_	8:00	(AM) (PM)	Taken	7-1	<u> </u>	/3 at <i>8.</i>	00 (AN)	(PM)
Well on L	ine:	Started	2	0 at	· · · · · · · · · · · · · · · · · · ·	(AM) (PM)	Taken		20	at	(AM)	(PM)
				-	OBSERVE	D SURFACE	DATA			Duration of Shu	t-in 24	_ Hours
Static / Orifice Dynamic Size Property (inches		Circle one Meter Prover Press psig (Pm	Differential in	Flowing Temperature t	Well Head Temperature t	(P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)	Liquid Prod (Barrel	
Shut-In	.750		, mettes 11 ₂ 0			psig 40	psia	psig	psia	24	 	
Flow												
_					FLOW STR	EAM ATTRI	BUTES		<u> </u>			
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Meter or rover Pressure psia	Press Extension √ P _m xh			Temperature F		eviation Metered Flow eactor R F _{pv} (Mcfd)		GOF (Cubic F Barre	eet/ F	owing Fluid ravity G _m
			<u> </u>				<u> </u>					
(P _c) ² =	:	(P _w) ² :	=:	(OPEN FLO		ERABILITY) % (P	- 14.4) +				$(a_1)^2 = 0.207$ $(a_1)^2 = $	
(P _c) ² - (P or (P _c) ² - (P	J	(P _c)²- (P _w)²	Choose formula 1 or 2: 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	P ² -P ² LOG of formula P ² -P ² 1. or 2. and divide		Backpressure Co Slope = "n" or Assigned Standard Slop		n x (OG		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
			•••					-			0	
Open Flow		Mcfd @ 14.65		S5 neia	5 nsia		Deliverability		Mofd		fd @ 14.65 psia	
		d authority o	on behalf of the		tates that he			o make ti		·		e of
			aid report is true		.,		16	day of	Octob ce K	ev les	, 20 <u>/</u>	
		Witness ((if any)				0	1	For C	Inpany		
		For Comm	nission					·	Chec	ked by	2 ,2	

I declare under penalty of perju	ry 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 info	ormation and statements contained on this application form are true and
correct to the best of my knowledge a	and belief based upon available production summaries and lease records
of equipment installation and/or upon	n type of completion or upon use being made of the gas well herein named.
I hereby request a one-year exer	mption from open flow testing for the Eldon #1
gas well on the grounds that said we	ill:
(Check one)	
is a coalbed meth	·
	ger lift due to water
	ural gas for injection into/an oil reservoir undergoing ER
	ne 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 b	est of my ability any and all supporting documents deemed by Commission
staff as necessary to corroborate thi	
•	·
Date: <u>10-15-13</u>	
•	
	Signature: Janice Ripley
	Title: Froduction Assistant
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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.