KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				(See Instruct	tions on Rev	erse Side	<i>=)</i>				2:	
Open Flow Deliverability 34H ShutlaTest				Test Date					No. 15 0 57-20744 -	-0000			
Company		RIOR, INC.	FILLIEST			Lease LINLOR				A-5	Well Nu	mber	
County Location FORD NW NE SE SE				Section 14			TWP 27S		RNG (E/W) 22W		Acres Attributed		
Field KONDA SOUTHEAST				Reservoir	SIPPIAN			Gas Gathering Connec		ection			
Completion 11/01/2011	Date .			Plug Bac 5143	k Total Dept			Packer S	Set at	· •			
Casing Size Weight 5.50 15.50			Internal Diameter 4.950		Set at 5168		Perforations 5023		To 5031	то 5031			
Tubing Size Weight 2.375 4.70			Internal Diameter		Set at 5140		Perforations		То	То			
Type Comple OIL & GA		escribe)	,		d Production			Pump Ur		Plunger? Yes	/ No		
Producing T	`	nulus / Tubin	g)	% C	arbon Dioxi	de		% Nitrog	en	Gas G	ravity - G) _g	
Vertical Dep		·			Pres	sure Taps				(Meter	Run) (Pr	over) Size	
Pressure Bu	uildup:	Shut in 10/	13 2	0_13 at_1	:00 PM	(AM) (PM)	Taken_1()/14	20	13 _{at} 3:30 F	РМ (AM) (PM)	
Well on Line	·		at		(AM) (PM) Taken				at	_ at (AM) (PM			
					OBSERVE	D SURFACE	DATA			Duration of Shut	-in 24	Hours	
Static / Orifice Dynamic Size Property (inches)		Circle one: Meter Prover Pressures (Pm)	Pressure Differential in Inches H ₂ 0	Temperature Tempe		ture Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	1 .	Liquid Produced (Barrels)	
Shut-In		poig (r m)	paig (i iii) iliches 17 ₂ 0				sig psia		psig psia				
Flow	v		÷		10			,					
	- 11		T		FLOW STR	EAM ATTRI	BUTES				· .		
Plate Coefficient (F _b) (F _p) Mcfd		Circle one: Meter or over Pressure psia	Meter or Extension er Pressure		Gravity T Factor F _g		Flowing Dev Femperature Fa Factor F **F********************************		Metered Flow R (Mcfd)	/ GOR (Cubic Fe Barrel)	eet/	Flowing Fluid Gravity G _m	
			-	-									
(P _c) ² =	·····	(P _w) ² =	. :	(OPEN FLO	,	ERABILITY)	CALCUL - 14.4) +		:	(P _a)) ² = 0.20) ² =	07	
		$\begin{array}{cccccccccccccccccccccccccccccccccccc$		LOG of formula 1. or 2. and divide by:		Backpressure Curve Slope = "n" or Assigned Standard Slope		T T		Antilog	Ope Deli Equals	Open Flow Deliverability Equals R x Antilog (Mcfd)	
	•												
Open Flow			Mcfd @ 14.	65 pela		Deliverabil	itv			Mcfd @ 14.65 ps	<u></u>		
The und		•		Company, s		e is duly aut	horized t			rt and that he ha	as knowl	edge of	
		· :						101	leu (ası .			
		· Witness (i				C WIC		Mi	Ke 51	modtm.	an		
		For Comm	ission			V 27 2		:	Chec	ked by			
				•	F	RECEIV	ΈD			*			

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 AMERICAN WARRIOR, 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 LINLOR A-5
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 a source of natural gas for injection into an oil reservoil undergoing En
is not capable of producing at a daily rate in excess of 250 mcf/D
13 not capable of producing at a daily rate in excess of 250 months.
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.
D 11/04/2012
Date: 11/04/2013
$()_{\lambda} \qquad ()$
Signature: X USD LEW USL
Title: PRODUCTION ASSISTANT
TITLE: TRODUCTION ASSISTANT

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.

KCC WICHITA NOV 27 2013 RECEIVED