KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:			G	See Instruct	ions on Reve	erse Side))				
□ Ор	en Flow	,		Test Date: API No. 15								
√ De	eliverabil	ty		09/09/20				AFT	181-2030	5-0000		
Company LOBO I		OUCTION, IN	IC.			Lease KUHLM	AN				Well Number 3-33	
County Location SHERMAN NW SW			Section 33	TWP 7S	, ,				Acres Attributed			
Field GOODLAND GAS FIELD)	Reservoir NIOBR					hering Conni	ection TION, INC.		
Completion Date 1 / 12 / 01				Plug Back Total Dept 1154'		h		Packer S	et at			
Casing Size 4.5			Weight 10.5#		Internal Diameter		Set at 1182'		rations 2'	то 1068'		
Tubing Size		Weig	Weight		Internal Diameter		Set at		rations	То	То	
Type Con SINGLE		(Describe)		Type Flui	d Production	1		Pump Ur	it or Traveling	Plunger? Yes	/ No	
Producing Thru (Annulus / Tubi CASING		g)	% Carbon Dioxi				% Nitrog	en	Gas Gravity - G _o .5877			
Vertical D	Depth(H)				Press	sure Taps			-	*	Run) (Prover) Size ETER RUN	
Pressure		: Shut in 09	709 2	0 13 at 0	745	(AM) (PM)	aken 09	/10	20	13 _{at} 0820	(AM) (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_24.59 Hours	
Static / Dynamic Property	Orific Size	Meter Prover Press	Pressure Differential ure in	Flowing Temperature t	Well Head Temperature t	Casin Wellhead P (P _w) or (P _t)	ressure	Wellhe	ubing ad Pressure (P,) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	(psig (Pm)	Inches H ₂ 0	,	•	psig 14	psia	psig	psia			
Flow												
					FLOW STR	EAM ATTRIE	BUTES					
Plate Coeffice (F _b) (F	cient =,)	Circle one: Meter or Prover Pressure psia	Press Extension	Grav Fact	tor 1	Flowing emperature Factor F _{tt}		ation ctor	Metered Flor R (Mcfd)	W GOR (Cubic F Barre	eet/ Fluid	
				(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS				
$(P_a)^2 =$		_: (P _w) ² :	=:	$P_d =$			- 14.4) +		:		$(x)^2 = 0.207$ $(x)^2 = $	
(P _c) ² - (or (P _c) ² - ((P _c) ² - (P _w) ²	Choose formula 1 or 2 1. P ₀ ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _w	LOG of formula 1, or 2, and divide	P _c ² - P _* ²	Slope (Assi	sure Curve = "n" or gned d Slope	nx	LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
Open Flo	ow		Mcfd @ 14	65 psia		Deliverabil	ity			Mcfd @ 14.65 p	sia	
		•					_			ort and that he h	as knowledge of	
the facts s	stated th	erein, and that s	aid report is tru	and correc		this the ISI WICH	ITA //	day of C	ecember d	· Mu	20 13 .	
	_	Witness	(if any)		110	, , , , , , , , , , , , , , , , , , ,	, ,, ,		For	Company	···, ,,	

DEC 04 2013

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 LOBO PRODUCTION, 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 KUHLMAN 3-33 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.