## Form G-2 (Rev. 7/03)

## Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test:					(See	Instruction	ns on	Revers	e Side)		_				
	en Flow iverability			Test Date:		10/16	5/201 	3			API No. →		1517521	3580	)000 
ompany OXY USA	A Inc				•	Lease LANGA	СНЕ	ER 1-12	· -				W	/ell N	lumber
County Seward			cation IWSE	s	ection 12	-	WP <b>33S</b>				G (E/W) 2 <b>W</b>		A		Attributed <b>40</b>
ield <b>AST HU</b>	IGOTON	l			eservoir h <b>ase</b>						Gathering Y USA	Connect	ion		
Completion 12/17/199					lug Back To <b>2,668'</b>	otal Depth				Pac	ker Set at				
asing Siz	e		eight .5#	lr	temal Dian 4.052"	neter	Se <b>2,70</b>	t at 10'			Perforations 2,552'	3	To <b>2,5</b>	93'	
ubing Siz 3/8"		4.7	eight 7#		itemal Dian .995''	neter		t at 2,577'	_	1	Perforations	S	То		
ype Comp INGLE-0	pletion (D <b>GAS</b>	escribe)			ype Fluid P <b>/ATER</b>	roduction				Pum	np Unit or T <b>No</b>	raveling	Plunger?		Yes / No
roducing	Annulu		ıbing)			urbon Dioxid 0.034%	de				litrogen 5.076%		Gas Grav 0.7	•	Gg
ertical De 2,57						Pressure Flan	•	s 						un) (F <b>3.06</b> 8	Prover) Size <b>8</b> ''
ressure B	Buildup:	Shut in	10/	1 <b>5</b> 2	0 <b>13</b> at	9:00			Taken		10/16	20 1	3 at 9	:00	
ell on Lin	ne:	Shut in		2	0a	·			Taken			20	at _		-
			_		(	DBSERVE	D SU	RFACE	DATA			uration o	of Shut-in	24	Hours
Static / Dynamic	Orifice Size	1 .	rcle one: Meter er Pressure	Pressure Differential in	Flowing Temperatur	Well Head		Wellhead	sing   Pressure   P <sub>c</sub> ) or (P <sub>c</sub> )		Tubi Wellhead f (P <sub>w</sub> ) or (P <sub>i</sub>	Pressure	Duration	n	Liquid Produced
Property Shut-In	(inches)	ps	sig (Pm)	Inches H <sub>2</sub> C	) t	t	+-	psig 100.0	psia 114		psig	psia	(Hours	-	(Barrels)
Flow		Τ			<del></del>	1	+-		117						
				<u></u>		LOW STRI	LL.	ATTDIE	HITEC				_1		
			_	—-т	<u>_</u>	т-		A) I NIE	0169				<del>-</del>	_	
Plate Coefficient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd	t	Circle one: Meter or Iver Pressure psia	Exte	ress ension , x h	Gravity Factor F <sub>g</sub>	Flowin Tempera Facto F <sub>ft</sub>	ture		ation etor	'	Metered Flow R (Mcfd)	(Cub	GOR ic Feet/Barrel)		Flowing Fluid Gravity G <sub>m</sub>
-					DEN ELO	1 (551)		<u> </u>		<u> </u>				<u></u>	
$(c_c)^2 =$	:	(P	) <sup>2</sup> = 0.0		P <sub>d</sub> =	W) (DELIVI %		(P <sub>c</sub> - 14			IONS			$_{a})^{2} = _{d})^{2} =$	0.207
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$	(P <sub>c</sub> )	² - (P <sub>w</sub> )²	Choose Form  1. $P_c^2$ -  2. $P_c^2$ -  divided by: I	ula 1 or 2: P <sub>s</sub> <sup>2</sup>	LOG of formula 1. or 2. and divide	P <sub>c</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup>	Back S	pressure ( Slope = "n'or Assigned	urve	nxL	OG		Antilog		Open Flow Deliverability quals R x Antilog (Mcfd)
			uivided by, i	G - F-W	by:		Sta	andard Sio	pe	-	<u></u>	+		$\vdash$	(MCIU)
													•	П	
oen Flow		0	<u>M</u> c	d @ 14.65	osia_	D€	elivera	bility				Mcfd (	9 14.65 psia		
e facts stated	therein, and		igned authority port is true and			states that he i	is duly i	authorized day		the abo	ove report and t <b>Noven</b>		knowledge of	i	2013
	_	_						_			0	XY USA			,
	·		Witness			KC	C \	WIC	HIT/	4	Aiı	For Comp		IM	ufan
		For	Commission			NC	י ענ	252	013						J

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R 1-12 for the gas well on the grounds that
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Instructions: If a gas well meets one of the eligibility criteria set out in the 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 31st 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.

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