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KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	;				(See Instruc	ctions on Re	everse Side	∍)	•		
□ Ор	en Flov	v			Test Date				A DI	No. 15		•
√ De	liverabi	lty			12/04/1					075-20062-0	00-00	
Company Linn Ope		Inc					Lease HCU				2231	Well Number
County Hamilton	1		Locati SE	on	Section 22		TWP 23S		RNG (E. 41W	(W)		Acres Attributed 640
Field Bradsha	w				Reservoi Winfield					thering Conne Field Service		
Completic 08/28/73		9		1 .	Plug Bac 2498'	k Total Der	oth ;		Packer S	Set at		
Casing Size 4.5		Weight , 9.5		Internal Diameter 4.090		Set at 2508'		Perforations 2479'		то 2494'		
Tubing Size 2 3/8		Weight 4.7		Internal Diameter 1.995		Set at 2497'		Perforations		То		
Type Con Single ((De	escribe)	•	Type Flui Gas - V	d Production Water	on	•	Pump Ui Pump	nit or Traveling	Plunger? Yes Ye	/ No S
Producing Annulus	,	(Anr	nulus / Tubing	3)	, % C	Carbon Diox	ride		% Nitrog	gen	Gas Gr .78	ravity - G _g
Vertical Depth(H)				Pressure Taps Flange				(Meter 2.067	Run) (Prover) Size			
Pressure	Buildup	o: :	Shut in	03 2	0 13 at 1	1:00 AM	(AM) (PM)	Taken 1	2/04	20	13 at 11:00	AM (AM) (PM)
Well on L	ine:		Started	20	0 at	· · · · · · · · · · · · · · · · · · ·	(AM) (PM)	Taken		20	at	(AM) (PM)
						OBSERVI	ED SURFAC	E DATA			Duration of Shut-	in 24 Hours
Static / Dynamic Property	Orific Size (inche	•	Circle one: Meter Prover Pressu psig (Pm)	Differential	Flowing Temperature t	Well Head Temperature t	Wellhead	sing I Pressure P ₁) or (P _c)	Wellhe	Tubing ead Pressure r (P ₁) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)
Shut-In							30	44.4	Pump		24	
Flow				-			<u> </u>					
	•					FLOW ST	REAM ATTI	RIBUTES				
Plate Coefficeient (F _b) (F _p) Mcfd			Circle one: Meter or Press Extension Prover Pressure psia Press Extension Pmx i		Gravity Factor F _g		Flowing Temperature Factor F _{ft}	Fa	riation actor = _{pv}	Metered Flow R (Mcfd)	(Cubic Fe Barrel)	1 Gravity
			 	<u> </u>	(005)		/50 A DU 17		4710110			
(P _c) ² =		:	(P _w) ² =	:	(OPEN FL		VERABILITY % (r) CALCUL P _e - 14.4) +			(P _a) (P _d)	² = 0.207 ² =
(P _c) ² - (F	P _a) ²	(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	LOG of formula 1. or 2. and divide		Backpri Sk	essure Curve ope = "n" or ssigned dard Slope		roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
									-		· · · · · · · · · · · · · · · · · · ·	
												
Open Flor	<i>N</i> .		· .	Mcfd @ 14.	65 psia	<u> </u>	Delivera	bility			Mcfd @ 14.65 ps	ia
			•					٠.		ne above repo ecember	rt and that he ha	as knowledge of
ne racis S	iaieo in	ereil	n, and that sa	aid report is true	and correc	i. Executed	unis the <u> </u>	M	aay or <u> </u>	H	idalal	, 20 <u>15</u>
			Witness (il	f any)			•		vools	For C	ompany ompany	
			For Comm	ission .	******					Chec	ked by	DEC 13 2

	r penalty of perjury under	r the laws of the state of K	Kansas that I am authorized to request				
exempt status unde		behalf of the operator Lin					
•	•	*	d on this application form are true and				
correct to the best	of my knowledge and belie	ef based upon available pr	oduction summaries and lease records				
of equipment instal	lation and/or upon type of	completion or upon use be	eing made of the gas well herein named.				
I hereby reque	st a one-year exemption fr	rom open flow testing for th	neHCU 2231				
gas well on the gro	unds that said well:						
(Check	·		•				
	is a coalbed methane pro-						
	is cycled on plunger lift du						
	is a source of natural gas for injection into an oil reservoir undergoing ER						
·	-	ent time; KCC approval Doo					
✓ .	is not capable of producir	ng at a daily rate in excess	of 250 mcf/D				
I further eares	to ouncly to the heat of m	w ability any and all auma	exting decuments decreed by Commission				
			orting documents deemed by Commission				
stati as necessary	to corroborate triis claim	for exemption from testing	·				
10/5	//2						
Date: 12/5	<u>/ / 3</u>						
•							
			17				
	Si	gnature: Man	Hierren.				
		Title: Regulatory Com	npliance Advisor				
	•						
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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.

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