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KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

ype Test					,		(See Insti	ructi	ons on Re	verse Side))						
✓ Open Flow✓ Deliverabilty				Test Date: 12/04/13					API No. 15 15-075-20461-00-00								
ompany inn Ope		Inc		4-1-1-TU2			•		Lease HCU	:		. , .	;	1611 E	Well Nu	ımber	
County Location Hamilton NE				Section 16						RNG (E/W) 41W			Acres Attributed 640				
ield Iradsha	W					Reservo Winfiel						hering Conn Field Servic					
Completic /10/90	on Dat	е				Plug Ba 2852'	ck Total D	epth	1		Packer S	Set at					
asing Si .5	sing Size Weight 5 9.5			Internal 4.090	Internal Diameter 4.090			Set at 2806'		Perforations 2744'			то 2766'				
3/8				Internal 1.995				Set at 2767 '		Perforations			То				
pe Com ingle (n (De	escribe)				iid Produc Water	tion			Pump Ur Pump	nit or Traveling	Plung	er? Yes Ye	/ No S		
roducing nnulus		(Ann	ulus / Tubir	ng)		%	Carbon Di	oxic	le		%. Nitrog	en _,		Gas Gr	avity - (G _g	
/ertical Depth(H) 2755'					Pressu Flang			ure Taps e					(Meter Run) (Prover) Size 2.067"				
ressure'	Buildu		onut in	/03	`				(AM) (PM)				13 a			(AM) (PM)	
Vell on L	ine:		Started		2	20 at _		_	(AM) (PM)	Taken		20				(AM) (PM)	
				·		1	OBSER	NE	SURFAC				Durati	on of Shut-	in_24	Hours	
Static / Orific ynamic Size roperty (inche		e Prover Pressur		sure	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Heat Temperat		Casing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Wellhe	Tubing Wellhead Pressure (P_w) or (P_t) or (P_c) psig psia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In	nut-In									49.4	Pump	Pump		24		_	
Flow																	
							FLOW S	TRI	EAM ATTR	IBUTES							
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension P _m x h		Fa	avity ctor =	Te	Flowing Deviation emperature Factor Factor F _{pv}		ctor	r R		w GOR (Cubic Fee Barrel)		Flowing Fluid 'Gravity G _m	
							.					·			,		
'c)² =			(P _w) ² :	=	:	(OPEN FI	• •	LIVE	ERABILITY) CALCUL -, - 14.4) +				(P _a) [;] (P _d) [;]	² = 0.2	207	
(P _c) ² - (F		(P	_c)²- (P _w)²	Choo	ose formula 1 or . 1. P _c ² - P _s ² 2. P _c ² - P _d ² led by: P _c ² - P _g	2: LOG of formula 1. or 2. and divide		2	Backpressure Curve Slope = "n" Assigned Standard Slope			n x LOG		Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)	
								•		· · · · · · · · · · · · · · · · · · ·			·				
,														• •			
pen Flo	w				Mcfd @ 14	.65 psia			Deliverat	oility 、			Mcfd €	14.65 psi	a		
		_	-		•	· -			-			ne above repo ecember	ort and			•	
tacts s	tated ti	nereir	n, and that s	said i	report is tru	e and corre	ct. Execu	ted	this the <u>5</u>	 D	day of <u> </u>	n H	Li	din	MC.	₂₀ <u>13</u> . C M/(C)	
			Witness For Com		•			- - -	-		,	•	Company cked by	- Cwt	NE	EC 13 2	

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 Linn Operating, 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 HCU 1611 B 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.
Date: 12/5/13 Signature: Man Haman Title: Regulatory Compliance Advisor

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

DEC 13 2013

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