KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test: | د ن en Flov | 17 | | S. 3* | | ` | tions on Re | verse Side | | | | | | |
|---|----------------------------|---|--|--|---|---|---|--|----------------------------------|---|--------------------------------------|--------------------------------|--|--|
| ✓ Deliverabilty | | | | Test Date 11/21/13 | | | API No. 15 15-075-20717-00-00 | | | | | | | |
| Company Linn Operating Inc | | | | | | Lease HCU | | | | | Well Number 0520 B | | | |
| County Location Hamilton C N2 SE/4 | | | | Section 5 | | TWP 22S | TWP 22S | | /W) | | Acres Attributed 640 | | | |
| Field Bradshaw | | | | Reservoir Chase | • | | | Gas Gathering Conr Oneok Field Service | | | | | | |
| Completion Date 8/30/00 | | | | Plug Bac 2857' | k Total Dep | th | | Packer S | Set at | | | | | |
| Casing Si 4.5 | Casing Size Wei | | | | | | Set at 2905' | | Perforations 2733' | | то 2752' | | | |
| Tubing Size Weight 2.3/8 4.7 | | | <u>.</u> t | Internal E | Diameter | Set | Set at Perforations 2814' | | | То | | | | |
| Type Completion (Describe) Single | | | | Type Flui Gas W | d Productio | n | Pu P | | nit or Travelin | | Plunger? Yes / No Yes | | | |
| Producing Thru (Annulus / Tubing) Annulus | | | | % Carbon Dioxide | | | | % Nitrogen | | Gas G .755 | Gas Gravity - G _g .755 | | | |
| Vertical D 2743' | /ertical Depth(H) 2743' | | | | Pressure Taps Flange | | | | (Meter Run) (Prover) Size 2.069" | | | | | |
| Pressure I | Buildur | p:` - | Shut in | 20 2 | ₀ <u>13</u> at <u>1</u> | 1:00 AM | . (AM) (PM) | Taken_1 | 1/21 | . 20 | 13 _{at} 11:00 | AM | (AM) (PM) | |
| Well on Li | ne: | | Started | 2 | 0 at | | (AM) (PM) | Taken | | 20 | at | | (AM) (PM) | |
| | | | | | | OBSERVI | ED SURFAC | E DATA | | | Duration of Shu | t-in24 | Hour | |
| Static / Dynamic Property | Orific Size (inche | е | Circle one: Meter Prover Pressu psig (Pm) | Pressure Differential re in Inches H ₂ 0 | Flowing Temperature t | Well Head Temperature t | Wellhead (P _w) or (I | Casing Wellhead Pressure (P _w) or (P _t) or (P _c) | | Tubing ead Pressure or (P ₁) or (P _c) | Duration (Hours) | | Liquid Produced (Barrels) | |
| Shut-In | | | | | - | | psig 58 | 72.4 | psig | psia | 24. | | | |
| Flow | | | | | | | | | | | | | | |
| | | | 0: | | | FLOW ST | REAM ATTE | RIBUTES | | <u>'</u> | | | Flowing | |
| Plate Coeffiecient (F _b) (F _p) Mcfd | | Pro | Circle one: Meter or over Pressure psia | Press Extension ✓ P _m x h | Gravity Factor F _g | | Flowing Temperature Factor F _{ft} | mperature Factor | | Metered Flo R (Mcfd) | (Cubic F | GOR (Cubic Feet/ Barrel) | | |
| | . | | | | | | | | | | | | | |
| P _c)² = | | | (P _w) ² = | | (OPEN FLO | | /ERABILITY % (| <mark>/) CALCUL</mark> P _c - 14.4) + | | | - | $)^2 = 0.2$ $)^2 =$ | 207 | |
| $(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$ | | (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 | LOG of formula 1. or 2. and divide | P _c ² - P _w ² | Backpr Slo | | | LOG | Antilog | O De | Open Flow Deliverability Equals R x Antilog (Mcfd) | |
| | | | | divided by: $P_c^2 - P_w^2$ | . by: | | Siano | dard Slope | | | | | | |
| | | | | | | | | | | | | | | |
| Open Flow Mcfd @ 14.6 | | | | 35 psia | | Deliveral | Deliverability | | Mcfd @ 14.65 psia | | | | | |
| | | | | | | | | | _ | | ort and that he h | | J | |
| e facts st | ated th | nerei | n, and that sa | id report is true | and correct | t. Executed | this the 2 | na . // | day of L | | , | | 20 13 | |
| | | | Witness (if | any) | | | | XX | nan | TT- | WWw. | KCC | WICH | |
| | | | For Commi | | | | | | | | cked by | DEC | 1 3 20 | |

| • | |
|-------------------|--|
| | |
| | der penalty of perjury under the laws of the state of Kansas that I am authorized to request |
| exempt status ur | nder Rule K.A.R. 82-3-304 on behalf of the operator Linn Operating Inc. |
| and that the for | egoing pressure information and statements contained on this application form are true and |
| correct to the be | st of my knowledge and belief based upon available production summaries and lease records |
| of equipment ins | stallation and/or upon type of completion or upon use being made of the gas well herein named. |
| I hereby req | uest a one-year exemption from open flow testing for the HCU 520 B |
| | grounds that said well: |
| | |
| (Ched | ck 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 |
| 7 | is not capable of producing at a daily rate in excess of 250 mcf/D |
| | |
| I further agr | ee to supply to the best of my ability any and all supporting documents deemed by Commission |
| _ | ary to corroborate this claim for exemption from testing. |
| '. | ny to derive enter enter exemplien non-testing. |
| Date:/ 2/ | $/_{\Lambda}/_{I_2}$ |
| Date: / < | $\frac{2/13}{2}$ |
| | |
| | |
| | |
| | 10° |
| | Signature: Man History |
| | Title: Regulatory Compliance Advisor |
| • | 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**

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