RECEIVED

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	: en É low	,		•		See Instruc	tions on Re	everse Side	∋)			
	liverabil				Test Date 11/21/13					No. 15 75-20410-0	0-00	
Company Linn Ope		Inc					Lease HCU				1930 E	Well Number
County Hamilton	1		Locatio C NE	n	Section 19	*	TWP 23S		RNG (EA	V)		Acres Attributed 640
Field Bradsha	w ,				Reservoir Winfield			-		ering Conne ield Service		
Completic 5/15/88	on Date	•			Plug Bac 5545'	k Total Dep	th .		Packer Se	et at		
Casing Si 5.5	ize		Weight 14.00		Internal E 5.012	Diameter	Set 558		Perform 2642		To · 2678'	
Tubing Si 2 3/8	ze		Weight 4.7		Internal D		Set 251		Perfor	ations	То	
Type Com Single C		(Desc	cribe)			d Production	า		Pump Uni Pump	t or Traveling	Plunger? Yes Ye	/ No S
Producing Annulus		(Annul	us / Tubing)		% C	arbon Dioxi	de ,		% Nitroge	en	Gas Gr .774	avity - G _g
Vertical D 2660'	epth(H)		-		Pres Flan	sure Taps				(Meter I 2.067	Run) (Prover) Size
	Buildup	: Sh	ut in11/2	0 2	0_13_at_1			Taken 1	1/21	20	13 _{at} 11:00	
Well on L				•							at	
	•		,			OBSERVE	D SURFAC	E DATA		·	Duration of Shut-	in 24 Hours
Static / Dynamic Property	Orific Size (inche	P	Circle one: Meter rover Pressur psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Wellhead	sing I Pressure P _t) or (P _c)	Wellhea	ibing d Pressure (P ₁) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In							24	38.4	Pump	poid	24	
Flow					,		. 4			-		
						FLOW STR	EAM ATTE	RIBUTES				
Plate Coeffieci (F _b) (F Mcfd	ient _p)	Me Prove	cle one: eter or r Pressure psia	Press Extension P _m xh	Grav Fact F _g	tor	Flowing Femperature Factor F _{ft}	Fa	viation actor F _{pv}	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	Growity
	,					, , , , , , , , , , , , , , , , , , , ,						
(P _c) ² =	•	:	(P _w) ² =_	:	(OPEN FLO	OW) (DELIV		/) CALCUL P _c - 14.4) +		:	(P _a)	² = 0.207 ² =
(P _c) ² - (F	Ť	(P _c) ²	?- (P _{,w})²	hoose formula 1 or 2. 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ vided by: $P_c^2 - P_a^2$	LOG of formula 1. or 2.	P _c ² -P _w ²	Backpre Slo 	essure Curve ope = "n" orssigned dard Slope	· I	og [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
							<u> </u>				¥	
Open Flov	w .		· · ·	Mcfd @ 14.	65 psia		Deliverat	bility			Mcfd @ 14.65 psi	a
. *									o make the	,	rt and that he ha	s knowledge of, 20 <u>13</u> .
ne lacis si	iaieu in	erem,	anu mat san	d report is true	anu correct	i. ⊏xecuted	uns the <u>-</u>	M	Way or	#	edson	
			Witness (if a	any)	·					For C	ompany	
			For Commis	sion			, -	;		Chec	ked by	DEC 13 2013

avamnt etatus un			ate of Kansas that I am a ator_Linn Operating, Inc.	uthorized to request
and that the fore	going pressure informat	tion and statements c	ontained on this application	
	allation and/or upon type lest a one-year exemptio	•	n use being made of the gaing for the HCU 1930 B	s well herein named.
gas well on the g	rounds that said well:			
,	is a coalbed methane plus cycled on plunger lift is a source of natural gis on vacuum at the press not capable of products.	ft due to water gas for injection into a esent time; KCC appro ucing at a daily rate in	excess of 250 mcf/D	
	(13	and the state of t		
Date: <u>/ 2 / 2</u>				

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.

DEC 13 2013