KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				(See Instruct	tions on Re	everse Side	e)				
Open Flo	wo							I- 46		. •	
✓ Delivera	bilty		. Test Dat 11/21/1					No. 15 75-20759-0	00-00		
ompany nn Operatin	ng Inc				Lease HCU		,			Well Number	
County Location Hamilton NW SE-SE		Section. 22					RNG (E/W) 40W		Acres Attributed 640		
Field Bradshaw			Reservoi Chase	Reservoir Chase			Gas Gathering Conne Oneok Field Service				
Completion Date 10/17/01			Plug Bac 2846'	Plug Back Total Depth 2846'			Packer Set at				
Casing Size			Internal 4.052"	Internal Diameter 4.052"		Set at 2891 '		Perforations 2711		то 2731	
ubing Size			Internal 1.995	Internal Diameter 1.995		Set at 2779'		Perforations		То	
Type Completion (Describe) Single Gas				Type Fluid Production Gas - Water			Pump Uni Pump	t or Traveling		er? Yes / No Yes	
Producing Thru (Annulus / Tubing) Annulus				% Carbon Dioxide			% Nitrogen			Gas Gravity - G _g	
Vertical Depth(H) 2721			, .	Pressure Taps Flange					(Meter F	(Meter Run) (Prover) Size 2.066"	
Pressure Build	up: Shut in _	11/20	13 _{at} _1			Taken 1	1/21	. 20	13 at 11:00 A	AM (AM) (PM)	
Well on Line:	Started _	* * * * * * * * * * * * * * * * * * *	_ 20 at	•	(AM) (PM)	Taken	·.	20	at	(AM) (PM)	
				OBSERVE	D SURFAC	E DATA			Duration of Shut-	in 24 Hour	
Dynamic Si	rice Circle Ze Prover Pi hes) psig (er Different	ial Flowing Temperature	Well Head Temperature t	. (P_w) or (P_t) or (P_c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration Liquid Produc (Hours) (Barrels)		
Shut-In	, ,	,	.20,		psig 52	psia 66.4	Pump	psia	24		
Flow											
	1			FLOW STR	REAM ATT	RIBUTES					
Plate Coeffiecient (F _b) (F _p) Mcfd	Circle one: Meter or Prover Pressu psia	Press Extension	on Fac	ior	Flowing Temperature Factor F _{ft}	Fa	riation actor = pv	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	Grouity	
						.]					
D 12			,	.OW) (DELIV		•				² = 0.207	
$P_{c}^{2} = $: (P,	Choose formula	: P _d =		T	P _c - 14.4) +		:	(P _d):	: = T	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$	(P _c) ² - (P _w) ²	1. P _c ² -P 2. P _c ² -P divided by: P _c ²	P _c ² -P _a ² LOG of formula P _c ² -P _c ² 1. or 2. and divide P _c ² -P _c ²		Backpressure Curv Slope = "n" or Assigned Standard Slope		n x L	og [].	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
	<u> </u>			,			<u> </u>				
Open Flow		Mcfd @	14.65 psia		Deliveral	bility			Mcfd @ 14.65 psi	a	
The under	signed authorit	y, on behalf of	the Company,	states that h	e is duly a				rt and that he ha	s knowledge of	
e facts stated	therein, and th	at said report is	true and correc	ct. Executed	this the _2	2nd	day of De	cember	•	, 20 13	
	Witn	ess (if any)		.		XVI	an.	- 1/2	edreug Company	CC WICH	
									*. **	_DEC 49 90	
	For	Commission		. —	•	.:		Chec	ked by	DEC 13 20	
										RECEIVI	

	nder the laws of the state of Kansas that I am authorized to request 4 on behalf of the operator Linn Operating, Inc.
	tion and statements contained on this application form are true and
correct to the best of my knowledge and b	pelief based upon available production summaries and lease records
of equipment installation and/or upon type	e of completion or upon use being made of the gas well herein named.
I hereby request a one-year exemption	on from open flow testing for the HCU 2220-C
gas well on the grounds that said well:	
(Check one)	
is a coalbed methane	
is cycled on plunger li	•
	gas for injection into an oil reservoir undergoing ER
	esent time; KCC approval Docket No.
✓ is not capable of prod	ucing at a daily rate in excess of 250 mcf/D
I further garge to supply to the best of	of my ability any and all supporting documents deemed by Commission
staff as necessary to corroborate this cla	
ola i de necessary le con escrita une cia	g.
Date: 12/21/3	
Date: / 🍑	
	, I
	Signature: Mann Hrencett
	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.

DEC 13 2013 RECEIVED