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KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

, i

Type Test	:			(See Instruc	tions on Rev	rerse Side))				
Op-	en Flow			Test Date	.			A DI	No 15			
Del	liverabilt	у		iesi Date	" 10·	28-1	3		No. 15 7-20656-0000)		
Company Jody Oil		Corp				Lease Jacobs				2	Well Nu	mber
County Location Harper SW-SE			Section 26				RNG (E.	W)		Acres Attributed		
Field Sp: V	٠ برعه	Grabs		Reservoii Mississi				Gas Gat Pionee	•	ction		
Completic 3-6-1981	on Date			Plug Bac	k Total Dept	th 440		Packer S	Set at		_	
Casing Si 5 1/2	ize	ze Weight Int 14		Internal (Internal Diameter		Set at 446 0		rations 1	то 43 99		
Tubing Si	ze Ø	Wei		Internal (Diameter	Set a	it	Perfo	rations	То		
Type Com	npletion	(Describe)		Type Flui	d Production	wat	·v	Pump Ua Pump	nit or Traveling Uni t	Plunger? Yes	/ No	
Producing Annulus	•	Annulus / Tubi	ng)	% C	Carbon Dioxi	de		% Nitrog	jen	Gas G	ravity - C	à _g
Vertical Depth(H)			Pressure Taps						(Meter	Run) (Pi	rover) Size	
Pressure	Buildup:	Shut in 1	3-28	20 13 at 1	2.00	(AM) (PM)	Taken		20	at	((AM) (PM)
Well on Li	ine:	Started 1	5-29	20 <u>3</u> at 1	2'- DO	(AM) (PM)	Taken		20	at	(AM) (PM)
					OBSERVE	D SURFACE		1		Duration of Shut	-in 2	+ Hours
Static / Dynamic Property	Orifice Size (inches	Prover Pres	Differential in	lemperature t	Well Head Temperature t	Casi Wellhead I (P _w) or (P _t psig	Pressure	Wellhe	Tubing ead Pressure r (P _t) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In						210	,			10 2 11.0		
Flow												
					FLOW STR	EAM ATTRI	BUTES					
Plate Coeffieci (F _b) (F _p Mcfd	ient _p)	Circle one: Meter or Prover Pressure psia	Press Extension ✓ P _m x h	Extension Factor Factor Factor		ctor	or R (Cubic I		eet/	Flowing Fluid Gravity G _m		
	<u> </u>		1	(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		/P)² = 0.2	07
(P _c) ² =		: (P _w) ²	= : Choose formula 1 or	P _d =			· 14.4) +		;) ² =	
$(P_c)^2 - (F_c)^2$		(P _c) ² - (P _w) ²	 P_c² · P_c² P_c² - P_d² divided by: P_c² - P_d 	LOG of formula 1. or 2. and divide	P _c ² - P _w ²	Slop	ssure Curve ne = "n" or signed ard Slope	l n x	LOG	Antilog	Deli Equals	oen Flow iverability : R x Antilog (Mcfd)
						_						
Open Flow			Mcfd @ 14	I.65 psia	·==·	Deliverabi	ility			Mcfd @ 14.65 ps	ia	
The	ındersia	ned authority	on behalf of the	Company	states that h	e is duly au	thorized t	o make ti		· · · · · · · · · · · · · · · · · · ·		ledge of
			said report is tru			_			N _{9 V} .			~
		Witnes	s (if any)			_	20	1	Aug For Co	mpany		
						_				K	CC'	WICHI
		For Cor	nmission						Check	ed by	DEC	2 3 2013

exempt sta and that th correct to the of equipme	re under penalty of perjury under the laws of the state of Kansas that I am authorized to request tus under Rule K.A.R. 82-3-304 on behalf of the operator Jody Oil & Gas Corp e foregoing pressure information and statements contained on this application form are true and the best of my knowledge and belief based upon available production summaries and lease record introduction and/or upon type of completion or upon use being made of the gas well herein named to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the state of the gas well herein to be the s
	y request a one-year exemption from open flow testing for the <u>Jacobs #2</u> the grounds that said well:
I furthe	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 er agree to supply to the best of my ability any and all supporting documents deemed by Commiscessary to corroborate this claim for exemption from testing.
	Signature: Deal Medical Title:

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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