## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:	:				(5	Gee Instructi	ons on Reve	rse Side)	)			
Open Flow					Test Date:				API	No. 15		
Del	liverabi	lty ———			11/11/13				15-0	095-21,613-0		
Company MTM PI		DLE	UM, INC.				Lease REIDA "D	) <b>"</b> .			۷ #2	Vell Number
County Location KINGMAN NE SW SW				Section 1				RNG (E/	W)	А	cres Attributed	
				Reservoir MISSISSIPPI			Gas Gathering Connection WEST WICHITA GAS GATHERING					
Completion Date 6/28/1989				Plug Back Total Depth 4134			Packer Set at NONE					
Casing Size Weight 4.5 10.5				Internal D 4.005	iameter	Set at <b>4199</b>		Perforations 4138		To 4143	:	
Tubing Si 2.375	Tubing Size 2.375				Internal Diameter 1.995		Set at <b>4119</b>		Perforations 4109		то <b>4109</b>	
Type Completion (Describe)  Type Fluid Production  Pump Unit or Traveling Plunge  SINGLE  GAS & WATER  PUMPING							Plunger? Yes	/ No				
_	-	(Anr	nulus / Tubing	)	% C	arbon Dioxid	ie		% Nitrog	en	Gas Gra	ivity - G <sub>g</sub>
TUBING Vertical D						Press	sure Taps	-			(Meter F	lun) (Prover) Size
4109						FLAN					2"	Inter-
Pressure	Buildu	<b>p</b> : :	Shut in	20	0 13 at 10	0:55	(PM) T	aken_11	1/11	20	13 at 10:55	(PM)
Well on L	.ine: 		Started	20	0 at		(AM) (PM) 1	aken	-	20	at	(AM) (PM)
	1				·	OBSERVE	D SURFACE		1		Duration of Shut-i	nHours
Static / Orifice Dynamic Size Property (inches)		е	Circle one: Meter Prover Pressur psig (Pm)	Pressure Differential in Inches H <sub>2</sub> 0	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> ) psig psia		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> ) psig psia		Duration (Hours)	Liquid Produced (Barrels)
Shut-In				2			175	рыа	psig	psia		
Flow												
	<del>-</del> 1		····			FLOW STR	EAM ATTRIE	BUTES				
Plate Coeffiecient (F <sub>b</sub> ) (F <sub>p</sub> ) Motd		Circle one: Meter or Prover Pressure psia		Press Extension P <sub>m</sub> x h	Gravity Factor F <sub>g</sub>		Temperature Factor		viation Metered Flo actor R F <sub>pv</sub> (Mctd)		W GOR (Cubic Fed Barrel)	Flowing Fluid Gravity G <sub>m</sub>
<u></u>					(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS			
(P <sub>c</sub> )² ≃		_:_	(P <sub>w</sub> ) <sup>2</sup> =_	:_					14.4 =	:	(P <sub>a</sub> ) <sup>2</sup>	= 0.207
(P <sub>c</sub> ) <sup>2</sup> - (1 or (P <sub>c</sub> ) <sup>2</sup> - (1	•	(F	P <sub>e</sub> )² - (P <sub>w</sub> )²	Choose formula 1 or 2: 1. $P_c^2 - P_s^2$ 2. $P_c^2 - P_c^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide	p <sub>c</sub> <sup>2</sup> -p <sub>x</sub> <sup>2</sup>	Assi	e = "n" )r	n x	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
												· , .
Open Flo	w			Mcfd @ 14.	65 psia	<del></del> =	Deliverabil	ity	_ <del></del>	· · · · · · · · · · · · · · · · · · ·	Mcfd @ 14.65 psi	a '
									_		ort and that he ha	s knowledge of
the facts s	stated t	herei	in, and that sa	id report is true	and correc	t. Executed	this the 5th	!	day of L	ecember		
			Witness (if	any)	<u>.</u>	1/04	10110		lun	For	Оолграпу	
						KC	C MICI					·
			For Commi	asiur(		ηF	r. 11 2	313		Che	cked by	•

RECEIVED

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 MTM PETROLEUM, 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
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 mct/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:  Title: MARVIN A. MILLER, PRESIDENT

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 11 2013

RECEIVED