Form G-2 (Rev. 7/03)

Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test:					(S	ee Instructi	ons o	n Reverse	Side)		•					
Open Flow Deliverability				Test Date: 05/14/2013						API No.		15081216660000				
Company DXY USA	Inc					Lease WATI		2-N17-3	0-32				٧	Vell Nu	mber	
County Haskell					Section 17		TWP 30S			RNG (E/W) 32W			Acres Attributed 640			
Field HASKELL TOWNSHIP				Reservoir Morrow/Atoka					Gas Gathering Connection Frontstreet				n			
Completion 19/26/200				-	Plug Back 5,800'	Total Dept	h	<u>-</u>		Packer Set	at				<u></u>	
asing Size Weight 1/2" 15.5#					meter Set at 5,838'			Perforations 5,297'				To 5,420 ′				
ubing Size Weight 7/8" 4.7#				Internal Diameter 1.995"			Set at 5,372 '			Perforations						
Type Completion (Describe) COMMINGLED-GAS					Type Fluid Production WATER/OIL				Pump Unit or Traveling Yes - Bean							
Producing Thru (Annulus / Tubing) Annulus					% Carbon Dioxide 0.182%				% Nitrogen 15.082%				Gas Gravity - Gg 0.754			
ertical Dep 5,359						Pressu Fla	ure Ta I nge	ips						un) (Pr 3.068	over) Size	
ressure Bu	uildup:	Shut in	05/1	3	20 13	at 9:00			Taken	05/1	1	20 13	at S	9:00		
Vell on Line	e:	Shut in _			20	at			Taken			20	at			
						OBSERV	ED SI	URFACE	DATA		Du	ration of	Shut-in_	24	Hours	
Static /	Orifice		one:	Pressure Differenti		ng Well He		Casing Wellhead Pressure		Tubing e Wellhead Pres				$\overline{}$		
Dynamic	Size	Size Prover Pressure			Tempera	* 1		(P _w) or (P _t) or (P _c)		(P _w) or (P _t) or		or (P _c)Durati				
Property Shut-In	(inches)	ches) psig (Pm) Inche		Inches H	90 <u>1</u>	<u>_</u>	14		psia 1414,	psig 4		psia (Hours)		_	(Barrels)	
Flow					\top	Ţ	1			_	\top	_				
						FLOW ST	REAL	M ATTRIE	UTES			_				
Plate Coefficient (F _b) (F _p)	_ A	Meter or Exten Prover Pressure			ress Gravity		wing erature ictor	Deviation Factor F _{pv}		Metered Flow R (Mcfd)		GOR (Cubic Feet/Barrel)			Flowing Fluid Gravity	
Mcfd	+	psia ———————	P _m	* h			fn 	-						+-	G _m	
P _c) ² =	_ _	(P _w) ²	= 0.0		(OPEN FL	-OW) (DEL	 IVER/ %		CALCUI (-4) + 14			<u> </u>		P _a) ² = _ P _d) ² = _	0.207	
(P _c) ² - (P _u) ²		C	hoose Formula 1 or 2: 1, P _c ² · P _a ² 2, P _c ² · P _d ²		LOG of formula	P _c ² -P _w ²	Ва	Backpressure Curve Slope = "n"		nxLOG		Antilog		<u>-</u>	Open Flow Deliverability	
(P _c) ² - (P _d) ²		(P _c) ² - (P _w) ²		P _d ²	and divide by:	, **	ĺ	Assigned Standard Slope		# X LOG				Equ	Equals R x Antilog (Mcfd)	
Open Flow			Mef	d @ 14.65	psia		Delive	erability				Mcfd @	14.65 psia	1_		
ne facts stated		The undersig	ned authority	, on behalf	of the Compa	any, states that ecuted this the	he is du	uly authorized	to make th		and the	at he has kn			2013	
						RECEIVE	ĔIJ				OX	Y USA	Inc.			
			/itness		CANSAST	ORPORATIO	N COM	MISSION				For Compa	ту		iifan	

COMSERVATION DIVINGY 25 2013

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 OXY USA 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 said well: WATKINS 2-N17-30-32 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 a 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: November 14, 2013
Signature: Aimee Lannou Di Mul Communication Signature: Gas Business Coordinator

Instructions: If a gas well meets one of the eligibility criteria set out in the 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 31st 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.

RECEIVED KANSAS CORPORATION COMMISSION

JAN 13 2014

CONSERVATION DIFFISION

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