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

| Type Test   | t:                          |   |                     |   | (   | See Instruc  | tions on Re   | verse Side   | 9)  |                      |                              |   |   |
|---|-----------------------------|---|---------------------|---|---|--|---|--|---|----------------------|------------------------------|---|---|
| ✓ Op  | en Flow                     |   |                     |   | Took Date   | _  |   |  | ADLA  | 1- 45                |                              |   |   |
| De  | liverabilty                 | <i>t</i>  |                     |   | Test Date: API No. 15<br>10-8-13 15-119-20585-00-00 |  |   |  |   |                      |                              |   |   |
| Company<br>HERMAN L LOEB LLC                      |                             |   |                     |   | Lease<br>M E SHEETZ                                 |  |   |  | #   |                      |                              | Well Number<br>2  |   |
| County Location MEADE E2 SW SE                    |                             |   | Section<br>28       | •   | TWP<br>33S  |  | RNG (E/W)<br>26W  |  |   | Acres Attribu<br>640 |                              |   |   |
| Field<br>MCKINNEY                                 |                             |   |                     | Reservoir<br>CHESTER  |   |  |   | Gas Gathering Connection DCP MIDSTREAM                       |   |                      |                              |   |   |
| Completion Date<br>9-15-82                        |                             |   |                     | Plug Back Total Depth<br>5916   |   |  |   | Packer Set at<br>NONE  |   |                      |                              |   |   |
| asing Size Weight .50 10.50                       |                             |   | Internal 0<br>4.052 | Diameter  |   |  |   | Perforations<br>5759   |   | то<br>5825           |                              |   |   |
| Tubing Size Weight 2.375 4.70                     |                             |   |                     | Internal I<br>1.995   | Diameter  |  | Set at Perfo<br>5865                                      |  | ations  | То                   |                              |   |   |
| Type Completion (Describe) SINGLE                 |                             |   |                     | Type Fluid Production WATER,CONDENSATE  |   |  |   | Pump Unit or Traveling Plunger? Yes / No<br>YES-PLUNGER LIFT |   |                      |                              |   |   |
| Producing Thru (Annulus / Tubing) TUBING          |                             |   |                     | % Carbon Dioxide  |   |  |   | % Nitrogen   |   | Gas G                | Gas Gravity - G <sub>0</sub> |   |   |
| /ertical E  |                             |   | <del>,</del>        |   |   | Pres   | sure Taps   |  |   |                      | (Meter                       | Run) (F   | Prover) Size                                  |
| Pressure Buildup: Shut in 10-8                    |                             |   |                     | 0.13 at 9:00 (AM) (PM) Tal  |   |  | Taken_1(  | )-9  | 20  | 13 at 9:00 (AM)      |                              | (AM) (PM)   |   |
| Well on Line: Started 20                          |                             |   |                     | 0 at (AM) (PM) Taken  |   |  |   |  |   |                      | (AM) (PM)                    |   |   |
|   |                             |   |                     |   |   | OBSERVE  | D SURFAC  | E DATA   |   |                      | Duration of Shut             | -in_2   | 4 Hours                                       |
| Static /<br>Dynamic<br>Property                   | Orifice<br>Size<br>(inches) | Circle one Meter Prover Pres                                    | sure                | Pressure<br>Differential<br>in  | Flowing<br>Temperature<br>t                         | Well Head Temperature t  Casin Wellhead P (P*) or (P;) |   | Pressure   | $(P_w)$ or $(P_t)$ or $(P_c)$                             |                      | Duration<br>(Hours)          | Liquid Produced<br>(Barrels)                                |   |
| Shut-in   |                             | psig (Pri   | "   "               | nches H <sub>2</sub> 0  |   |  | psig<br>65  | psia   | psig  | psia                 | 24                           |   |   |
| Flow  |                             |   |                     |   |   |  |   |  |   |                      |                              |   |   |
|   |                             |   |                     |   |   | FLOW STF   | REAM ATTR   | IBUTES   |   | •                    |                              |   |   |
| Plate<br>Coeffiec<br>(F <sub>b</sub> ) (F<br>Mcfd | ient<br><sub>p</sub> ) #    | Circle one:<br>Meter or<br>Prover Pressure<br>psia              |                     | Press<br>Extension  | Grav<br>Fact  | tor  | Temperature Fa  |  | viation Metered Flow<br>actor R<br>F <sub>pv</sub> (Mcfd) |                      | GOR<br>(Cubic Fo             | et/   | Flowing<br>Fluid<br>Gravity<br>G <sub>m</sub> |
|   |                             |   |                     |   |   |  |   |  |   |                      |                              |   |   |
| °c)² =  |                             | (P <sub>w</sub> ) <sup>2</sup>                                  | =                   | :   | (OPEN FLO   | OW) (DELIV   |   | ) CALCUL<br>2 - 14.4) +                                      |   | :                    | (P <sub>a</sub> ,            | ) <sup>2</sup> = 0.2<br>) <sup>2</sup> =                    | 207   |
| (P <sub>e</sub> ) <sup>2</sup> · (I               | ·                           | (P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup> |                     | Choose formula 1 or 2:  1. P <sub>c</sub> <sup>2</sup> - P <sub>a</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup> |   | P2. P2   | Backpressure Curve Slope = "n" or Assigned Standard Slope |  | B OX LOG  |                      | Antilog                      | Open Flow<br>Deliverability<br>Equals R x Antilog<br>(Mcfd) |   |
|   |                             |   |                     |   |   |  |   |  |   |                      |                              |   |   |
| Open Flor   | W                           |   | M                   | lcfd @ 14.  | 65 psia   |  | Deliverab   | oility   |   |                      | Mcfd @ 14.65 ps              | ia  |   |
|   |                             | ed authority,<br>ein, and that                                  |                     |   |   |  | •   |  |   | above repoi          | rt and that he ha            |   | riedge of 20 13 .                             |
|   |                             |   |                     |   |   |  |   |  | un  |                      | ne_                          | ,   | S   |
|   |                             | Witness   | s (if any)          |   |   |  | _   | //6  | carrie of   | For C                | ompany                       | KCC   | ≯WICH   |
|   |                             | For Cor   | nmission            |   | ···   | <del></del> !  | t   |  |   | Chec                 | ked by                       | DE(   | 12 20   |
|   |                             |   |                     |   |   |  |   |  |   | /                    |                              | F   | RECEIVE                                       |

|                    | •  |
|--------------------|--|
|                    | ler penalty of perjury under the laws of the state of Kansas that I am authorized to request der Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L LOEB LLC  |
| and that the fore  | going pressure information and statements contained on this application form are true and  |
| correct to the bes | t of my knowledge and belief based upon available production summaries and lease records   |
| of equipment inst  | allation and/or upon type of completion or upon use being made of the gas well herein named.   |
| I hereby requ      | est a one-year exemption from open flow testing for the M E SHEETZ #2  |
| gas well on the g  | rounds that said well:   |
| (Check             | cone)  |
|                    | 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   |
| <b>.</b>           | is not capable of producing at a daily rate in excess of 250 mcf/D   |
| (                  | The state of the s |
| I further agre     | e to supply to the best of my ability any and all supporting documents deemed by Commission  |
| staff as necessar  | y to corroborate this claim for exemption from testing.  |
|                    |  |
| Date: NOVEMBE      | ER 16, 2013  |
| Date.              |  |
|                    |  |
|                    |  |
|                    |  |
|                    | Signature: fame was  |
|                    | Title: HERMAN L LOEB LLC AREA SUPERVISOR   |
|                    |  |
|                    |  |
|                    | ·  |

## 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.