KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				((See Instructi	ions on Re	verse Side)			
✓ Open I	Flow			Test Date	a •			A Di	No. 15		
Delive	abilty			4-23-13					No. 15 119-20447-0	0-00	
ompany IERMAN L	LOEE	LLC				Lease LOEWE	N C	,		#1	Well Number
ounty Location IEADE W2 SW SW			Section 25		TWP 32S		RNG (E/W) 28W		Acres Attributed 160		
Field BORCHERS NORTH '			Reservoir CHESTER				Gas Gathering Con DCP MIDSTREAM				
Completion Date 615-80			Plug Back Total Depth 5720		h ·	1		Set at	' <u>-</u>		
Casing Size 1.50			Internal Diameter 4.052		Set at 5720		Perforations 5660		то 5682		
ubing Size Weight 4.70		Internal Diameter 1.995		Set at 5671		Perforations		То			
Type Completion (Describe) SINGLE			Type Flui WATE	id Production				Pump Unit or Traveling Plunger? Yes / No YES-PUMPING UNIT		/ No	
Producing Thru (Annulus / Tubing) ANNULUS				% (Carbon Dioxid	de	9 % N		jen .	Gas Gravity - G _g	
/ertical Dept	h(H)				Press	sure Taps ,		,		(Meter	Run) (Prover) Size
ressure Bui	dup:	Shut in 4-2	232	0_13_at_8	:30	(AM) (PM)	Taken 4-	24	20	13 _{at 8:30}	(AM) (PM)
Vell on Line:		Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
		,	. '		OBSERVE					Duration of Shut-	in 24 Hou
Oynamic	rifice Size iches)	Circle one: Meter Prover Press psig (Pm)	Differential in	Flowing '- Temperature t	'Well Head Temperature t	Cas Wellhead (P _w) ∞ (P	Pressure	Wellhe	Tubing ead Pressure r (P ₁) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)
Shut-in						psig 135	psia	psig	psia ,.	24	
Flow			-								
•					FLOW STR	EAM ATTR	IBUTES				
Plate Coeffiecient (F _b) (F _p) Mcfd	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fac F	tor T	Flowing emperature Factor F _r ,	Fa . F	iation ctor	Metered Flow R (Mcfd)	GOR (Cubic Fe Валеі)	Growing
							•				
°c)2 =	:	(P _w)² :	=:	(OPEN FL	OW) (DĔĹIVÉ) CALCUL 2 - 14.4) +		:	(P _a)	² = 0.207 ² =
$(P_e)^2 - (P_a)^2$ or $(P_g)^2 - (P_g)^2$	(F	P _c) ² - (P _w) ²	Choose formula 1 or 2 1. P _c ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _d ²	LOG of formula 1. or 2. and divide		Backpre Slop As	ssure Curve pe = "n" - or signed ard Slope	n x	LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
<i>t</i> .	'			, .	1		1 () () () () () () () () () (<u> </u>			
		<u> </u>	Section 1		1 2 11	<u> </u>	1 F		34	4 + 5	
pen Flow			Mcfd @ 14.	65 psia	 	Deliverab	ility	i 1	<u>'</u> !	Mcfd @ 14.65 ps	ia
The unde	rsigne	d authority, o	on behalf of the	Company, s	states that he	s is duly au				t and that he ha	is knowledge of
	d there		said report is true	and correc	t. Executed				OVEMBER		, 20 13
• • • • • • • • • • • • • • • • • • • •			:			. ، با د	Ja	w	4007	ME-KI	CC ANICH
		Witness	(if any)		•	· · · · · · /		.0	For C	ompany •	£0 .0 00
		For Com	mission			U	/	-	Chec	ked by	12 2013
									•		RECEIVE

	1
	or penalty of perjury under the laws of the state of Kansas that I am authorized to request er Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L LOEB LLC
	oing pressure information and statements contained on this application form are true and
	of my knowledge and belief based upon available production summaries and lease records
	lation and/or upon type of completion or upon use being made of the gas well herein named.
	st a one-year exemption from open flow testing for the LOEWEN C #1
	unds that said well:
3	
(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 mcf/D
I further agre	to supply to the best of my ability any and all supporting documents deemed by Commission
staff as necessar	to corroborate this claim for exemption from testing.
~	
Date: NOVEMBE	₹ 16, 2013
	Signature: Museus Misc
•	Title: MERMAN 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.