51 PTest

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:				(See Instruct	ions on Re	verse Side)				
Open Flow													
Deliverabilty					Test Date	. Test Date: 11-12-13				No. 15 119-21250-0	0000		
Company			J1 1. B. 1 J. M. 1 at a M.		11-16-1		Lease					Well Number	
		RG	YRESOURC	ES CORP.		, RICKERS RAN			ICH				
County Location MEAD 660 FSL & 1320FEL				Section 20		TWP 33S			(W) Acres Attribute		Acres Attributed		
Field				Reservoir MORR					hering Conn		PATRICULAR STANDARD S		
Completion Date					Plug Bac 6050	k Total Dept	h		Packer Set at NONE				
Casing S 4.5	Size		. Weight		Internal Diameter 4.052		Set at 6235		Perforations 5790		To 5822		
•	Tubing Size Weight				Internal E	Diameter	Set at		Perfo	rations	То		
2,375 4.7					1.995 57				<u>som er imper</u>				
Type Completion (Describe) SINGLE GAS					WATE	Type Fluid Production WATER			Pump Unit or Traveling Plun YES-PUMP				
Producing Thru (Annulus / Tubing) ANNULUS					% C	% Carbon Dioxide			% Nitrog	jen	.756		
Vertical Depth(H) 5806					Pressure Taps FLANGE						•	(Meter Run) (Prover) Size 3.068"	
Pressure	Buildu	p: :	Shut in11-1	11-13	0 at_0	930	(AM) (PM)	Taken_11	-12-13	20	at 0930	(AM) (PM)	
Well on L	_ine:	•									at		
	,					OBSERVE	D SURFAC	E DATA	·		Duration of Shut-	in 24.0 Hou	
Static / Dynamic Property	Oriti Siz (inch	Meter Differentia		Differential	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P _c)		Wellha (P _w) o	Tubing ead Pressure r (P _t) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In			P0.9 (1 ///)	manos rigo			psig 57.9	72.3	psig	psia	24.0		
Flow													
	·1					FLOW STR	EAM ATT	RIBUTES					
Plate Coeffiecient (F _b) (F _p) Mofd		Pro	Circie one: Meter or Iver Pressure psia	Press Extension P _m xh	Gravity Factor F _e		Flowing Femperature Factor F ₁₁	perature Factor		Metered Flor R (Mcfd)	w GOR (Cubic Fe Barrel)	Gravity	
I					-								
		-,-,			(OPEN EL	OW) (DELIV	ERARUITY	A CALCIN	ATIONS				
(D)2 -			(P)2					P _e - 14.4) +				? = 0.207 ? ≠	
(, , –		=	(P _w) ² =	Cnaase formula 1 or 2			-T				\ 's'	I	
(b ^c) ₅ · (b ^a) ₅ at (b ^c) ₅ · (b ^a) ₅				1. P _c ² ·P _a ² 2. P _c ² ·P _o ² ivided by: P _c ² -P _o ²	LOG of formula 1, or 2, and divide by:	P.2. P.2	Backpressure Curve Stope = "n"or Assigned Standard Stope		n x LOG		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
				. "									
Ones Flor							Delivershift				New (2 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Open Flow Mcfd @ 14.6				55 psia Deliverability			Mcfd @ 14.65 psia						
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_					and 001100			. ^	-u, 0,	. 4	errene erteren bir durum er wundetektere er errer etteber.		
Cop	y 4	6/	CC Witness tif	ichita any)			ا ل ،	· Pre	ec,5.	m Wi	ielined Company Bro	lesting	
				•		DEC 2	0 2013			Man	hof Bu		
			For Commi	ssion			-			Che	cked by		

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to re exempt status under Rule K.A.R. 82-3-304 on behalf of the operator O'BRIEN ENERGY RESOURCES and that the foregoing pressure information and statements contained on this application form are true correct to the best of my knowledge and belief based upon available production summaries and lease re of equipment installation and/or upon type of completion or upon use being made of the gas well herein in I hereby request a one-year exemption from open flow testing for the RICKERS RANCH 4-20 gas well on the grounds that said well:	ue and ecords
(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 agree to supply to the best of my ability any and all supporting documents deemed by Costaff as necessary to corroborate this claim for exemption from testing.	mmission
Date:/Z//6_//3	
Signature:	·

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.