KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:	E1				(See Ins	structi	ions on Re	verse Side)					
Open Delive					Test Date	: ·					No. 15 023-21009-	00-00			
Company Noble Ener	av. Inc							Lease Rueb F	arm	· · · · · · ·			11-15E	Well Nu	mber
County Location Cheyenne E2-NE-NW-NW				Section 15			TWP 3S		RNG (E/W) 42W			Acres Attributed			
					Reservoir			Gas Gathering Connecti Kinder Morgan			ection				
				Plug Bac		Dept	h	Packer Set at							
Casing Size Weight 7", 4.5" 17#, 11.6#				Internal Diameter 9-7/8", 6-1/4"			Set a	at ', 1712'	Perforations 1537'			To 1574'			
Tubing Size Weight 2-3/8" 4.7#			Internal Diameter 1.995			Set a 158	at	Perforations			То				
Type Comple					Type Flui		uction			Pump Ui Yes	nit or Traveling	Plung	ger? (Yes)	/ No	
Single (gas) Producing Thru (Annulus / Tubing)					% Carbon Dioxide				Yes Rod P % Nitrogen			Gas Gravity - G			
ubing Vertical Dept	h(H)						Press	sure Taps		<u>.</u>			(Meter l	Run) (Pr	over) Size
Pressure Bui	ldup:	Shut in	3	20	13 at 1	:15		(AM) (PM))Taken		20	·	at	(AM) (PM)
Well on Line:		Started 1/9	}	20 13		3 1:30		(AM) (PM) Taken		20		•			
						OBSE	RVE	D SURFAC	E DATA			Durat	ion of Shut-	_{in} 24.	25 Hours
Static / Orifice Dynamic Size Property (inches)		Circle one: Meter Prover Press	Diffe	essure erential in	Flowing Well F Temperature Temper t t		i Wallhaad Pre		Pressure	Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In		psig (Pm)	inch	es H ₂ 0				psig 100	psia	psig	psia				
Flow					,										
	- 	····	· · · · · ·			FLOW	STR	EAM ATTR	IBUTES						
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or over Pressure psia	Exte	ress ension P _m xh	Gravity Factor F _g		Flowing Temperature Factor F ₁₁		Fa	riation actor F _{pv}			GOR (Cubic Fee Barrel)		Flowing Fluid Gravity G _m
			<u>.</u>												
D /5 _		(P _w) ² :	_		(OPEN FL			ERABILITY % (i	') CALCUL P _e - 14.4) +				(P _a); (P _a);	2 = 0.2	07
$\frac{(P_c)^2 = {(P_c)^2 - (P_a)^2}}{(P_c)^2 - (P_d)^2}$	(P _c) ² - (P _w) ²	Choose formula 1 or 2: 1. P _c ² - P _d ² 2. P _c ² - P _d ² divided by: P _c ² - P _w ²		LOG of formula 1. or 2. and divide	P _c ² - P		Backpressure Curve Slope = "n"		, n x log		Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)	
	ļ														
Open Flow			Mcfe	d @ 14.6	1 35 psia			Deliverat	oility			Mcfd (@ 14.65 psi	<u> </u> a	
The und	ersigne	d authority, o	on behal	f of the	Company, s	states ti	nat h	e is duly a	uthorized t	to make ti	ne above rep	ort and	that he ha	s know	ledge of
e facts state	d there	in, and that s	aid repo	ort is true	and correc	t. Exec	uted	this the 2	6	day of	ecember		<u>.</u>	,	20 13 .
		15.77-	#IE +- \				_	_				0		KC	C WICI
		Witness	(if any)								For	Company	· 		3 1 2 0
		For Com	mission				_	-			Che	cked by			
														R	ECEIVE

	clare 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 Noble Energy, Inc.
and tha	t 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
	ment installation and/or upon type of completion or upon use being made of the gas well herein named.
l he	reby request a one-year exemption from open flow testing for the Rueb Farm 11-15B
gas wel	I 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 mcf/D
l fu	rther agree to supply to the best of my ability any and all supporting documents deemed by Commissic
	necessary to corroborate this claim for exemption from testing.
_	0/00/40
Date:	2/26/13
	Signature:
	Title: Regulatory Analyst
	Title: Regulatory Arranyst

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.

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