KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:		ONL	1 0	(See Instructi	ions on Rev)	·		
	oen Flo eliverat				Test Date May 2, 2					No. 15 033213570	0000	
Company		lora	tion, Inc.				Lease White					Well Number
County Comanche		·-	Location E/2 SE		Section 18			TWP 33S		/W)	Acres Attributed	
Field Shimer						Reservoir Mississippi		Gas Gath Oneok		thering Conno	ection	
Completi 06/09/0		te			Plug Bac 5071'	k Total Dept	h		Packer	Set at		
Casing S 5 1/2"			Weight 15.5#		Internal Diameter		Set at 5122'		Perforations 5027'		то 5042'	
Tubing S 2 3/8"	Tubing Size 2 3/8"		Weight		Internal Diameter		5071'		Perfo	orations	То	
Type Cor Single			escribe) s & Oil Pe	rforations	Type Flui Saltwa	d Production ter/Oil	1		Pump U Pump	nit or Traveling ing		/ No
Producing Annulus	-	(Anı	nutus / Tubin	g)	% C	Carbon Dioxid	de		% Nitro	gen	Gas Gr	avity - G _g
Vertical E	Depth(l	1)				Press	sure Taps				(Meter F	Run) (Prover) Size
Pressure	Buildu	ıp:	Shut in Ma	ıy 1 2	13 at 8	:00	(AM) (PM)	Taken_M	ay 2	20	13 at 8:00	(AM) (PM)
Well on L	_ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
-	ı		Circle one:	1 8		OBSERVE	D SURFACI		T		Duration of Shut-	n Hou
Static / Dynamic Property	Orifice Size (inches)		Meter Prover Press psig (Pm)	i	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Wellhe	Tubing ead Pressure or (P ₁) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)
Shut-In			F3 (···/	1101100 1130			psig 800	psia 814.4	psig	psia		
Flow									<u></u>			
	_		Circle one:	Ι -		FLOW STR	EAM ATTR	IBUTES		=		Flowing
(F _b) (F	Coefficient (F _b) (F _p) Mcfd		Meter or ver Pressure psia	Press Extension ✓ P _m x h	Gravity Factor F _g		Temperature Factor F _{pv}		ctor	Metered Flow R (Mcfd)	GOR (Cubic Feet/ Gra Barrel) G	
(P _c) ² =		:	(P)² =	= :	-	OW) (DELIV)) CALCUL ² ្ច - 14.4) +		:		= 0.207
(P _c) ² - (or (P _c) ² - (P _a) ²	(F	P _o) 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: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide by:	P _c ² ·P _w ²	Backpre- Stop	ssure Curve be = "n" - or signed ard Slope		LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
											. 181	
Open Flo	w			Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 psi	a
		•	•	n behalf of the aid report is true			•			•	rt and that he ha	s knowledge of
uie iacis s	stated l	nerei	н, ано mat s	aru report is titul	_				_	7/	_	, 20
			Witness	(if any)		CC W		`, 	(<i>j</i>	For C	Company	
			For Com	nission		JAN 0 2	2014	<u></u>		Chec	ked by	

	i e e e e e e e e e e e e e e e e e e e
l declare ur	nder penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt status u	nder Rule K.A.R. 82-3-304 on behalf of the operator
and that the for	egoing pressure information and statements contained on this application form are true and
correct to the be	est of my knowledge and belief based upon available production summaries and lease records
of equipment in	stallation and/or upon type of completion or upon use being made of the gas well herein named.
I hereby red	uest a one-year exemption from open flow testing for the White #1-18
gas well on the	grounds that said well:
(Che	ck one)
Ĺ	is a coalbed methane producer
Ĺ	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 further ag	ree to supply to the best of my ability any and all supporting documents deemed by Commissio
_	ary to corroborate this claim for exemption from testing.
olan as necess	ary to correspond to the chain for exemption from testing.
	0040
Date: July 26th	, 2013
	Signature:
	Title: President

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.

KCC WICHITA JAN 02 2014