KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:					(See Instr	ructions on Re	verse Side))				
Open Flow						n: (ABI	No. 15			
☐ De	liverabi	lty			4-3-1	7			15-	071-20036	-8000		
Company Horseshoe Operating, Inc.							Lease Well Number Thompson 1						
County Location Greeley C SW					Section 31/4		TWP 20S		RNG (EW)			Acres Attributed 640	
Field Reservoir Bradshaw Chase						ir.				hering Conne lidstream	ction !-		
Completion Date Plug Back Total D 2789						epth		Packer Set at None					
Casing S 4.5	Casing Size Weight 9.5				Internal 4.09	Diameter	Set a 278		Perforations 2772		то 2784		
Tubing Size Weigh 2.375 4.7				1.995		2777			Perforations		То		
						Type Fluid Production Water				Pump Unit or Traveling Plunger? Yes / No Yes			
_		(Апл	ulus / Tubin	g)	% (Carbon Did	ebixo		% Nitrog	en	Gas Gr	avity - G	
Annulus Vertical D	_		-			· Pr	eşsure Taps				(Meter I	Bun) (Prover) Size	
Vertical Depth(H) 3030									, .			371	
Pressure	Buildup	: S	hut in	7-2	eo/4 _{at_}	9:00	(AM)(PM)	Taken	4-3	20 4	14 _{at} 9;1	20 (AM)(PM)	
Well on L	ine:	8	itarted	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)	
. %	17			-,		OBSER	VED SURFAC	E DATA			Ouration of Shut-	in_24_Hours	
Static / ' Dynamic	Orific Size	ze Prover Press		Pressure Differential ure in	Flowing Temperature		d Wellhead	Casing Wellhead Pressure (P _w) or (P ₁) or (P _c)		ubing ad Pressure (P _c) or (P _c)	Duration (Hours)	Uquid Produced (Barrels)	
Property Shut-In	(inche	8)	psig (Pm)	Inches H ₂ 0	<u> </u>	t	psig 75	psla	palg	psia	24		
Flow						 	- /~ 		 	 		 	
					l	EI OW S	TREAM ATTR	IBIITES	Щ			<u> </u>	
Plate Coeffieci (F _b) (F _b Mcfd	ent)	Circh one: Meter or Prover Pressure psla		Press Extension ✓ P _m ×h	Gra Fac F	vity tor	Fleuring		riation actor F _{pv}	, Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	Groulte	
				<u> </u>				<u> </u>			<u> </u>		
(P _c) ² =		;	(P _w)²≃	<u>:</u>	(OPEN FL	OW) (DEL	.IVERABILITY %(F) CALCUI 2 - 14.4) +		` :	. (P _a)	² = 0.207 ² =	
(P _c) ² - (F or (P _c) ² - (F	-	(P ₂) ² - (P ₄) ²		Choose famula 1 or 2 1. P _c ² -P _d ² 2. P _c ² -P _d ² divided by: P _c ² -P _d	LOG of formula, 1. or 2. and divide	P _c ² -P _s ²	Slo _l	ssure Curve pe = "n" -or signed ard Slope	n x i	LOG []	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
					<u> </u>		-						
Open Flow		 Mcfd @ 14.5			65 psia	•	Deliverab	Deliverability			Acfd @ 14.65 ps	 ia	
		ned	authority, o	* * * * * * *		states that	the is duly a	uthorized	to make th			as knowledge of	
				aid report is true			•	16	day of _	June	_	,20 <u>/4</u> .	
•		_	Witness (i	тапу)		·			anic	& Ky	Olley ompany	KCC WICH	
			For Comm	dasion				<u> </u>		Chec	V ked by	JUN 2 0 2 01	
											•	2011 2 0 201	

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declare 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 Horseshoe Operating, Inc. and that 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
of equipment installation and/or upon type of completion or upon use being made of the gas well herein named. I hereby request a one-year exemption from open flow testing for the
gas well on the grounds that said well:
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 Commission staff as necessary to corroborate this claim for exemption from testing.
Date: 6-/6-/4
Signature: Janice Ripley Title: Production Assistant

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.