KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	it:					(See Instruc	tions on Re	verse Sid	e)			·
	oen Flo eliverab			•	Jest Date	e; / /			AP	l No. 15	200	
Company			na Inc	-	4-3-	14	Lease . Dotts	•	07	5-20098 - 8	1	Well Number
			Local C SW/		Section 28	Section 28		TWP 23S		/W)	. ,	Acres Attributed
Field Bradshaw				Reservoi Chase	r			Gas Gathering Cont DCP Midstrea		ection		
Completi	on Dai	9	<u></u> ,			k Total Dep	th		Packer			£,- ² ,,
Casing S			Weig	ht	Internal Diameter		Set at 2585'		Perforations 2498'		то 2510'	
Tubing S 2-3/8"	ize		Weig 4.7	ht	Internal Di		Set a	Set at 2529'		prations	То	
Type Completion (Describe) Single - Gas				Type Flui Water	d Production		Pump Unit or Trave					
Producing Thru (Annulus / Tubing) Annulus				% (Carbon Dioxi	de				Gas Gravity - G		
Vertical Depth(H)				Pressure Taps Flange				(Meter Run) (Prover) Siz				
Pressure	Buildu	p: S	 hut in	4-2	20 <u>/</u> 4 _{at} _			Taken	4-3	320	14 at 8:0	00 (AM) (PM)
Well on L	.ine:			e e			_					(AM) (PM)
						OBSERVE	D SURFACI	E DATA			Duration of Shu	t-in <u>24</u> Hou
Static / Dynamic Property	ynamic Size		Circle one: Meter Prover Press psig (Pm)	Differential in	Flowing Temperature t	Well Head Temperature t	verature Wellhead Press		Tubing Wellhead Pressure (P,) or (P,) or (P,) psig psia		Duration (Hours)	Liquid Produced (Barrels)
Shut-In	.50	00						87			24	
Flow	<u> </u>			1	<u> </u>		<u> </u>					
				Τ	- 	FLOW STR	EAM ATTR	IBUTES				
Plate Coeffictient (F _b) (F _p) Mcfd		٨	circle one: Meter or er Pressure psia	Press Extension	Extension Fac		tor Temperature		Deviation Metered R Factor R F _{pv} (Mcfd		W GOR (Cubic F Barrel	eet/ Fluid
				<u> </u>	(OPEN FL	OW) (DELIV	ERABILITY) CALCUL	ATIONS	<u> </u>)° 0.007
P _c) ² =	•	_:	(P_)² =		P _d =	• •		ر <mark>- 14.4) +</mark>		<u>:</u> ::) ² = 0.207) ² =
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _c) ² - (P _w) ²		Choose formula 1 or: 1. P _c ² -P _q ² 2. P _c ² -P _d ² divided by: P _c ² -P _q	LOG of formula 1. or 2. and divide	P.2. P.2	Backpressure (Slope = "n or Assigned Standard Sk		n x LOG		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
Open Flo				Mcfd,@ 14	65 nsia			ility			Mcfd @ 14.65 ps	ļ Sia
		ioned	authority. c	-,.	•	states that h			o make ti			as knowledge of
		_		said report is tru		t. Executed	this the	16	day of	Juni	7.1	
			Witness	(if any)			WICH		an	CCU K	iple	
		., .	For Com			<u>JU</u> N	2 0 201	4	<i>V</i>	Che	cked by	<u> </u>
						R	ECEIVE	D		-110	·- · · · ·	

I 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 Dotts #1 gas well 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
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:

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.