RECEIVED

## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				(8	See Instructions	on Reverse Side	9)							
Open F	low					*								
Deliverability			Test Date:					API No.	_					
				5/20/20	14				<u> 15-11</u>	9-20	352 <b>-0000</b>			
Company				Lease									Well Number	
Samson Resources Company County Location				Adams Section TWP					RNG	/EAAN		3-18 Acres Attributed		
Meade	ŧ	2 SWSE	n.	18					28			Acres	Alinbuled	
Field		/Z JWJC		Reservoir		35					Connection			
Adams R	anch				Gen-St L	ouis					esources,	Inc		
				Chester-St. Gen-St. Louis Plug Back Total Depth					Packer Set at					
6/16/1979			6385											
Casing Size			Internal Diameter		Set at			Perforations			То			
5.5	5.5 14		5.012		6401			5854			6368			
Tubing Size	ing Size Weight			Internal Diameter		Set at			Perforations			То		
2.375		4.7		1.995		6370					_			
Type Comple				Type Fluid Prod					Pump U	Init or T	raveling Plunge	er? Yes /	No	
Multiple (				Oil-Water								Yes		
Producing Th	nru (Annulus	/ Tubing)		% Carbon Diox	ide			% Nitro	gen				Fravity - Gg	
Casing	5 /IIV				D						// / 5		6646	
Vertical Dept					Pressure Taps	i					(Meter F	Run) (Prover) Si	ze	
6400		0-1-1-14-	- 00 80	44	Pipe			11.	. 04		44 .	2.068	44.54.55	
Pressure Bui Well on Line:	•	Shut-in May		14 at		_(AM/PM) Taker		ма	y-21	20			(AM/PM)	
well on Line:	•	Started	20	et		_(AM/PM) Taker	1		<del>-:</del> -	20	at		(AM/PM)	
	T			OBŞE	RVED SURF						n of Shut-in	Hours		
Ctotic /	Orifice	Circle one:	Pressure	Elevrie e	10/-1111		sing		١,,		oing LD	Dti	Dec doc	
Static / Dynamic	Size	Meter or Prover Pressure	Differential in (h)	Flowing Temperature	Well Head Temperature	Wellhead (Pw) or (I					l Pressure Pt) or (Pc)	Duration (hours)	quid Produce (Barrels)	
Property	inches		Inches H2O	t	t	psig		sia	ps		psia	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(55,15,5)	
Shut-in	ĺ				1	142	15	6.4				24		
Flow					1							1		
		•	<u> </u>	FLOW	STREAM AT	TRIBUTES					1	<u> </u>		
Plate	, ,	Circle one:				Flowing		j					Flowing	
Coeffied		Meter or	Press		Gravity	Temperature Factor Ft.		Deviation Factor		Me	etered Flow	GOR	Fluid	
(Fb)(F <sub>l</sub> Mcfd		Provor Prossure psia	Extensio (Pm x Hw)	• •	Factor Fg.					R (Mcfd)		(Cubic Feet/	Gravity Gm	
IVICIO	<u>'</u>	рыа	(FILX DW)	-	rg.	Ft.		Fpv			(MCIU)	Barrel)	Gili	
				ODEN EL OU	W /DELIVED	L CAL	2111 AT	IONE				<u> </u>	l	
				(OPEN FLUV	V) (DELIVERA	ABILITY) CAL	JULAI	IUNS				(Pa)2= 0.207		
(Pc)2 24.461 (Pw)2=			Pd = % (Pc-14.4)+14.4=								(Pd)2=			
(1 0)2	.701	\` '' <sup>,z_</sup>				_ /6	7). 17.7				<del></del>	(i u)E		
			Γ	٦		Backpressure				٦ :				
(Pc)2 - (	(Pa)	(Pc)2 - (Pw)2	Pc2 - Pa			Slope= "i		n x LOC	.		ANTILOG	Open		
or (Pc)2 - (Pd)2			Pc2 - Pd Pc2 - Pw		_		Assigned				ļ !	_ Deliverability Equals R x Antilog		
			L		د ک	Standard S			_	_		Mo	_	
												ſ		
_				ĺ	<u>-</u>	0.781					7			
		•												
Open Flow		0	Mcfd @ 14.65	5 psia		Deliverbility						Mcfd @ 14.6	65 psia	
													<del>-`</del>	
The u	ndersigned	l authority, on beh	alf of the Com	pany, states ti	hat he is duly	authorized to n	nake th	ne abov	e repor	t and th	nat he has			
knowledge	of the facts	stated therein, ar	nd that said re	port is true an	d correct.									
			12			N	n				,	11		
Executed this the				day of						\(\alpha^20 \lefta \)	<del>/</del> .			
							1	2		///	WA	0	RC-	
						-	1		M_	UL	<u> 137                                   </u>		<u></u>	
		Witness (if any)					-	_	(	Fo	r Company			
												/CC \A/I		
									_	Com		KCC WI		
<b>□</b> - 1 -		For Commission	, 2+	21 /2	200					CI	hecked by	JUN 02	<b>ኃ</b> ሀየታ	
70/0	1- <i>0</i> 7	For Commission $80-00$	01-0	/ <del>5</del> /-/=	100							JOH O.S	2017	

I declare under penalty or perjury under the laws of the state of Kansas that I am authorized to requeexempt status under Rule K.A.R. 82-3-304 on behalf of the operator  Samson Resour									
and that the foregoing information and statements contained on this application form are true and correct to the best of my knowledge and belief based upon gas production records and records of equipment installa-									
tion and/or type completion or upon use of the gas well herein named.									
I hereby request a permanent exemption from open flow testing for the	Adams 3-18								
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.									
X is incapable of producing at a daily rate in excess of 250 mcf/D									
Date: 5/23/2014	•								
Date: 5/23/2014									
Signature: Adk (N) Title: Las Meur	Legeral St								

Instruction All active gas wells must have at least an original G-2 form on file with the conservation division. If a gas well meets 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 obtain a testing exemption.

At some point during the succeeding calendar year, wellhead shut-in pressure shall be 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.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than thirty (30) days after the taking of the pressure reading. The form must be signed and dated on the front side as though it was a verified report of test results.

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