KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Company Company Company County	= .	: en Flov liverabi					Test Date 4-03-20):	tructi	ions on Rev	erse Side	API	No. 15 -095-220	18	~ <i>80</i>	6D		
County Location TWP ENA (EMr) Acres Attributed Not many Preservoir Plant Stat Not many Perforations To many Perforations Perforations Perforations To many Perforations Perforation	Company Wilton F		eum	Inc.			7 00 20	,,,			Credit I			-		V	Vell Nu	ımber
Reservoir Missispip West Wichita Memory Missispip West Wichita Memory Missispip West Wichita Memory	County Location							TWP		RNG (E/W)			Acres Attribute			Attributed		
1-19-2006 3890 NA Internal Diameter 5 1/2" 15 4,974 3890 3820 3820 3828 To a second place Weight Internal Diameter Set at Perforations 5 1/2" 7/39 (Carbon Dioxide) Started 4-08 20 14 at 10 (AM) (PM) Taken 4-08 (AM) (PM) Taken 4-	Field		•					Reservoir										
15	•		0					k Total [Dept	h	7.33.33							
2.76° 6.5 2.441 3816 Subject Completion (Describe) Type Fluid Production Pump Unit or Traveling Plunger? Yes / No Acidize Subject Country																		
Acidize Saltwater & Oil Pumping Unit Producing Thru (Annulus / Tubing) % Carbon Dioxide % Nitrogen Gas Gravity - G _q Both Vertical Depth(H) Pressure Taps (Meter Run) (Prover) Size Pressure Buildup: Shut in 4-07 20 14 at 10 (AM) (PM) Taken, 4-08 20 14 at 10 (AM) (PM) Well on Line: Started 4-08 20 14 at 10 (AM) (PM) Taken, 4-08 20 14 at 10 (AM) (PM) Well on Line: Started 4-08 20 14 at 10 (AM) (PM) Taken, 4-08 20 14 at 10 (AM) (PM) OBSERVED SURFACE DATA Duration of Strut-In Hour OBSERVED SURFACE DATA Duration of Strut-In Froperty (Inches) Prover Pressure In In Froperty (Inches) Prover Pressure In In Froperty (Inches) Prover Pressure In In From Plate Coefficient Prover Pressure In In Flow STREAM ATTRIBUTES PLOW STREAM ATTRIBUTES Plate Coefficient Prover Pressure In In Factor Fac	Tubing Si 2 7/8"	Ze .		_	ht										То			
Producing Thru (Annulus / Tubing) % Carbon Dioxide % Nitrogen Gas Gravity - G, Both Pressure Taps (Moter Run) (Prover) Size	Type Completion (Describe)					Type Fluid Production			Р			Plung	lunger? Yes / No					
Pressure Buildup: Shut in 4-07 20 14 at 10 (AM) (PM) Taken 4-08 20 Taken 4-08		Thru	(Annt	ulus / Tubii	ng)		% C	arbon D	ioxic	de			_			Gas Gra	vity - (G,
Started 4-08 20 14 at 10 (AM) (PM) Taken 4-08 20 14 at 10 (AM) (PM)		epth(H	i)					F	ress	sure Taps						(Meter R	lun) (P	rover) Size
Started 4-08 20 14 at 10 (AM) (PM) Taken 4-08 20 14 at 10 (AM) (PM)	Pressure Buildup: Shut in 4-07 20 14 at				14 at 1	4 at 10 (AM) (PM) Taken 4				I-08 ₂₀ 1				10	(AM) (PM)			
State / Onlice Dynamic Size Circle onc. Motor Prover Pressure posig (Pm) Inches H_0 Inch	Well on Line: Started 4-08 20			-			(AM) (PM)	Taken_4-	08			14 a	10	(AM) (PM)				
State Orifice Orific								OBSEI	RVE	D SURFACE	DATA	· ·			Durati	on of Shut-i	n	Hours
FLOW STREAM ATTRIBUTES Plate Coefficient (F ₃) (F _c) Melfer or Prover Pressure psla (OPEN FLOW) (DELIVERABILITY) CALCULATIONS (P _c) ² =	Dynamic	Size	ice Meter ze Prover Pressu		sure	Differential În	Temperature	Temperature		Wellhead Pressure (P_{\bullet}) or (P_{t}) or (P_{o})		Wellhead Pressure (P_w) or (P_t) or (P_c)						
FLOW STREAM ATTRIBUTES Plate Coefficient (F _s) (F _s) Meter or Prover Pressure psia (OPEN FLOW) (DELIVERABILITY) CALCULATIONS (P _s) ² = (P _w) ² = (P _w) ² = P _a = .	Shut-In					2					para		pold					_
Plate Coefficient Meter or Prover Pressure Little Factor Fig. Flowing Factor Factor Fig. P. P. P. Meter of For Prover Pressure Posla P. P. P. Meter of Factor Fig. P.	Flow					_								,				
Coefficient (F _y)(F _y) Midd Prover Pressure pista Pactor F _y P _y Xh P					_		1	FLOW	STR	EAM ATTRI	BUTES				-			
P _c ² = : (P _w) ² = : P _d = % (P _c -14.4) + 14.4 = : (P _d) ² = (P _c) ² =	Coefficcient (F _b) (F _p)		Meter ot Prover Pressure			Extension	Factor		Temperature Factor		Factor		R		(Cubic Fee		eV	Fluid Gravity
P _c ² = : (P _w) ² = : P _d = % (P _c -14.4) + 14.4 = : (P _d) ² = (P _c) ² =							(OPEN EL	OW) (DE	ועו וי	FRARII ITV)	CALCUL	ATIONS						<u> </u>
Open Flow Mcfd @ 14.65 psia Deliverability The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the Witness (if any) The University of Commission Open Flow Mcfd @ 14.65 psia Deliverability Mcfd @ 14.65 psia The University on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the Witness (if any) For Commission Checked by Checked by Checked by	(P _c) ² =		<u>_:</u>	(P _w)²	=	:	•			-			:					:07
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the	_	_	(P _o)²- (P _w)²			1. P _c ² -P _a ² 2. P _c ² -P _d ²	formuta 1. or 2. and divide p 2 _ p 2		2	Slope Assi	e = "n" or igned	n x	roe		Antilog		Deliverability Equals R x Antilog	
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the	· · · · · ·						-			<u> </u>				_				
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the					<u>L_</u>) ns:-			Delivershii	lia.	Д			68-E- /	3 14 SE mais	_	
witness (if any) For Commission Executed this the 14 day of July day of For Commission Checked by Checked by				مناه مناه د	b			4-1 16			•	a mantro el	ha ahawa m				•	dadaa al
For Commission Checked by KCC Will			-	-								day of _	uly	po	and and	low		
Full Cartillists At Control of the C				Witness	if en	y)			_	_	12	, , , , , , , , , , , , , , , , , , ,	<i></i>	ForC	ompany		V	کر ۱۸ ۱۱
		· · · · ·		For Corr	nmlask	on .			_					Chec	ked by	·	•	_

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	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exemp	t status under Rule K.A.R. 82-3-304 on behalf of the operator Wilton Petroleum, Inc
and th	at the foregoing pressure information and statements contained on this application form are true and
correc	to the best of my knowledge and belief based upon available production summaries and lease records
•	pment installation and/or upon type of completion or upon use being made of the gas well herein named.
1 h	ereby request a one-year exemption from open flow testing for the Tip Top Credit Union #5
gas we	ell 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
	<u> </u>
l fe	urther agree to supply to the best of my ability any and all supporting documents deemed by Commission
staff a	s necessary to corroborate this claim for exemption from testing.
Data:	7-14-2014
Dale	· · · · · · · · · · · · · · · · · · ·
	Signature: Richald Cala
	Signature:
	Title: Vice 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

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