KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | : | | | | (| See Instruct | ions on Rev | erse Side, |) | | | | | |
|--|-------------------------------|----------|--|--|--|----------------------------|--|---------------------|---|---------------------------|--|-------------------|-----------------------------|--|
| ☐ Open Flow ✓ Deliverability | | | | Test Date | | API No. 15 | | | | _ | | | | |
| _ _ | | <u> </u> | | | 08-19-20 | 014 | 10000 | | 007 | <u>-22678-000</u> | | Vell Nun | | |
| Company REDLAN | | SOL | JRCES, LL | c | | | Lease SPICER | | | | #7-15 | Well Hun | er | |
| County BARBER | | | Location SE/4 | | Section 7 | | TWP 35S | | RNG (E/W) 15W | | Acres Attributed 160 | | | |
| Field AETNA GAS AF | | | REA | | | Reservoir MISSISSIPPIAN | | | | hering Conne GAS PIPEL | | | | |
| Completion Date 10/29/2001 | | е | | | Plug Back 5295' | k Total Dept | h | | Packer Set at N/A | | | | | |
| Casing Size 4.5" | | | Weigh 10.50 | | Internal Diameter 3.876" | | Set at 5350' | | Perforations 5184' | | то 5250' | | | |
| Tubing Size 2.375" | | | Weigh 4.7# | t | Internal Diam 1.995" | | meter Set at 5039' | | Perforations | | То | | | |
| Type Con | noletio | n (De | | | | d Production | | <u> </u> | Pump Ur | nit or Traveling | Plunger? Yes | / No | | |
| SINGLE ZONE | | | <u>-</u> | | CRUD | E OIL/ SA | LT WATER | | PUMPING UNIT | | | | | |
| Producing Thru (A | | | (Annulus / Tubing) | | | arbon Dioxi | de | % Nitrogen | | en | Gas Gravity - G | | a | |
| Vertical D | epth(F | () | | | | Press | sure Taps | | | | (Meter F | Run) (Pro | over) Size | |
| Pressure | Buildu | p: 4 | Shut in 08- | 19 2 | 0 14 at 1: | 13PM | (AM) (PM) | Taken_08 | 3-20 | 20 | 14 at 1:50PM | <u>/</u> | AM) (PM) | |
| Well on L | ine: | ; | Started | 2 | 0 at | | (AM) (PM) | Taken | | 20 | at | (| AM) (PM) | |
| | | | | | | OBSERVE | D SURFACE | DATA | | | Duration of Shut-i | _{in_} 24 | Hours | |
| Static / Orifice Dynamic Size | | | Circle one: Meter | Pressure Differential | Flowing Well Head Temperature Temperature | | Casing Wellhead Pressure (P _w) or (P _t) or (P _c) | | Tubing Wellhead Pressure (P _w) or (P _c) | | Duration | Liquid Produced | | |
| Property | (inch | es) | Prover Pressu psig (Pm) | in Inches H ₂ 0 | t | t | psig | psla | psig | psia | (Hours) | ,,, | arreis) | |
| Shut-In | | | | <u> </u> | | | 80 | | 150 | $T_{}$ | | _ | | |
| Flow | | | | | _ | _ | | | | Ţ | | | | |
| | | | | | | FLOW STR | EAM ATTRI | BUTES | | | | | , | |
| Plate Coeffictient (F _b) (F _p) | | Pro | Circle one: Meter or Iver Pressure | Press Extension | Grav Fac | tor | Flowing emperature Factor | ture Fact | | Metered Flov | (Cubic Fe | | Flowing Fluid Gravity | |
| Mcfd | | | psia | √ P _m xh | F _s | · | F _n F _p | | (Mcfd) | | Barrel) | | G _m | |
| | | | | L | _ | | | | | | | | | |
| (P _c) ² = | | | (P)² = | : | • | . , | ERABILITY) % (P | CALCUL + (14.4 - | | | (P _a); (P _d); | 2 = 0.20 2 = |)7 | |
| | | | | Choose formula 1 or 2 | <u> </u> | | Backpres | sure Curve | -1 | | | | en Flow | |
| (P _c) ² - (I | [| (F | 'c)2 - (P_)2 | 1. P _c ² -P _a ² 2. P _c ² -P _d ² | LOG of formula 1, or 2. | | | e = "n" or | n x | LOG | Antilog | Deliv | verability R x Antilog | |
| (P _c) ² - (l | P _d) ² | | 1 | divided by: P ₀ ² -P _w | and divide | P.2 - P.2 | | igned ud Slope | | r J | | | Mcfd) | |
| | | | | | | | | | | | | | | |
| | | | | | _ | | | | | | | <u> </u> | | |
| Open Flo | w | | | Mcfd @ 14 | 65 psia_ | | Deliverabi | lity | | | Mcfd @ 14.65 psi | a | | |
| The | unders | igne | authority, o | n behalf of the | Company, s | states that h | e is duly au | thorized to | o make th | ne above repo | rt and that he ha | ıs knowl | edge of | |
| the facts s | tated t | herei | n, and that s | aid report is tru | e and correc | t. Executed | this the 22 | <u>:</u> | day of A | ngast | | , 2 | 0 14 | |
| | - | | Witness (| f any) | | KANSAS CO | Received PRPORATION G | OMMISSION | | For | Company | | | |
| | | | | | | SE | P 02 2 | <u> </u> | | | | | | |
| | | | For Comm | ussion | | - | | - • • | | Che | cked by | | | |

| 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 REDLAND RESOURCES, LLC 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 SPICER #7-15 |
|---|
| 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: 8/22/14 |
| 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.