KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes			OIL	i oliti o	(See Instruct	tions on Rev	erse Side))	LIIADILII	1 1201			
= :	pen Flo eliverat				Test Date 08-13-2					No. 15 3-21516-00-0	00			
Company	y ND RI	 ESO	— URCES, LI	 .c		Lease WAYLON				· ·	#2-11	Well Number #2-11		
County Location COMANCHE NE SW				Section 2				RNG (E/W)		Acres Attributed				
Field SHIMER					Reservoir MISSIS	r SIPPIAN			Gas Gathering Co ONEOK		ection			
Completi 06-24-20		te		•	Plug Bac 5160'	k Total Dept	h		Packer S	Set at	_			
Casing S	Size				Internal Diameter 3.927"		Set at 5273'		Perforations 5111'		To 5124'			
Tubing S 2.375"	ize		Weigh 4.7#	nt	Internal I 1.995"	Diameter	Set a 5162	t		rations	То		_	
Type Cor			escribe)		Type Flui	d Production			Pump U	nit or Traveling	Plunger? Yes	/ No		
Producing TUBING	roducing Thru (Annulus / Tubing)			% C	% Carbon Dioxide			% Nitrogen		Gas Gravity - G _g				
Vertical D		1)				Pres	sure Taps				(Meter	Run) (F	rover) Size	
Pressure	Buildu	p:	Shut in 08-	13 2	14 at 7	:20PM	(AM) (PM)	Taken 08	3-14		14 _{at} 7:20P	м	(AM) (PM)	
Well on L											at			
						OBSERVE	D SURFACE	DATA			Duration of Shut	_{-in_} 24	Hours	
Static / Dynamic Property			Circle one: Meter Prover Pressure psig (Pm) Pressure Differential in Inches H.0		Flowing Well Head Temperature t t t		(P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In			page My	maios rigo			psig 165	psia	psig	psia				
Flow						·		_						
Plate		_	Circle one:	Press			Flowing						Flowing	
Coeffiecient (F _b) (F _p) Mcfd		Pro	Meter or ver Pressure psia	Extension P _m x h	Gravity Factor F _g		Temperature Fa		viation Metered Flow actor R F _{pv} (Mcfd)		GOR (Cubic Fe Barret)		Fluid Gravity G _m	
L	1													
(P _c) ² =		:	(P_) ² =	:	(OPEN FLO		ERABILITY) % (P.	CALCUL - 14.4) +		<u>.</u>	(P _a) (P _d)	2 = 0.2	207	
(P _c) ² - (F or (P _c) ² - (F	2,)2	(P	c)2-(Pw)2	Choose formula 1 or 2 1. P _o ² -P _d ² 2. P _o ² -P _d ² divided by: P _o ² -P _w ²	LOG of formula 1, or 2, and divide	P _c ² - P _w ²	Backpres Stop Ass	sure Curve e = "n" origned rd Slope		rog	Antilog	O De	pen Flow liverability s R x Antilog (Mcfd)	
	_											_		
Open Flo	\ w		i		 65 psia	<u> </u>	 Deliverabi	Iity			Mcfd @ 14.65 ps	ia.		
					Company, s		e is duly aut	thorized to		ne above repo	rt and that he h	as knov	viedge of	
			Witness (i		_		Received		,		Соптралу	'		
			For Comm	<u>. </u>		SEI					ked by			
						V-I	~ L L0			Ollec				

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 record of equipment installation and/or upon type of completion or upon use being made of the gas well herein named	- d s
I hereby request a one-year exemption from open flow testing for the WAYLON #2-11	
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 Commisstaff as necessary to corroborate this claim for exemption from testing. Date:	sion
Signature: 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.