Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	t:	ONE		(See Instruct	ions on Reve	erse Side)	. IADILI1	1 1201		
☐ Open Flow ✓ Deliverabilty					Test Date: 07/31/2014			API No. 15 181-20302-0000				
Company LOBO PRODUCTION, INC.				0170172	Lease BRINEY			Well Number 3-33				
County Location SHERMAN SE SE SE			Section 33		TWP 7S	· · · · · · · · · · · · · · · · · · ·			Acres Attributed			
Field GOODLAND GAS FIELD			Reservoi NIOBF					ering Conne PRODUC	ection TION, INC.	-		
Completion Date 11 / 9 / 00			Plug Back Total Dep 1115'		h		Packer Set at					
Casing Size 4.5		Weig 15#	ght	Internal Diameter		Set at 1140'		Perforations 982'		_{То} 1016'		
Tubing Size		Weig	Weight		Internal Diameter		Set at		ations	То		
Type Con SINGLE		(Describe)		Type Flui	d Production	1		Pump Un	it or Traveling NO	Plunger? Yes	/ No	
Producing Thru (Annulus / Tubing) ANNULUS			ng)	% Carbon Dioxide				% Nitrogen Gas Gravity - G _o .5877				
Vertical D					Press	sure Taps					Run) (Prover) Size ETER RUN	
Pressure	Buildup:	Shut in 07	7/31 ₂	14 at 0	655	(AM) (PM) T	aken 08	3/01	20	14 at 0740	(AM) (PM)	
Well on L	.ine:	Started	2	0 at		(AM) (PM) T	aken		20	at	(AM) (PM)	
					OBSERVE	D SURFACE	DATA			Duration of Shut	-in _24.75Hours	
Static / Dynamic Property	Orifice Size (inches	Meler Prover Pres	Differential in	Flowing Temperature t	Well Head Temperature t	Casin Wellhead Pi (P _w) or (P _t) psig	ressure	Wellhea	ubing ad Pressure (P ₁) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In						17						
Flow						<u> </u>		ı				
			<u>-</u> -	r	FLOW STR	EAM ATTRIE	UTES	—— _—		1		
Plate Coeffiec (F _b) (F Mcfd	ient ,)	Circle one: Meter or Prover Pressure psia	Press Extension √ P _m xh	Grav Fac F	tor T	Flowing emperature Factor F _n	Fa	iation ctor	Metered Flov R (Mcfd)	v GOR (Cubic Fo Barret)	eet/ Fluid	
(P _c) ² =		: (P _w) ²	= :	(OPEN FL		ERABILITY)	CALCUL - 14.4) +		•	(P _a)) ² = 0.207	
(P _c) ² - (I	P _a) ²	(P _c) ² - (P _w) ²	Choose formula 1 or 2	LOG of formula		Backpress Slope	ure Curve	n x l	og	Antilog	Open Flow Deliverability	
(P _c) ² - (I	P _d)²		2. P _c ² - P _d ² divided by: P _c ² - P _w	1. or 2. and divide by:	P _c ² - P _w ²	Assiq Standar	gned				Equals R x Antilog (Mcfd)	
Open Flo	w		Mcfd @ 14	.65 psia		Deliverabili	ty			Mcfd @ 14.65 ps	ila.	
The	undersig	ned authority,	on behalf of the	Company, s	states that h	e is duly auth	norized te	o make th	e above repo	rt and that he ha	as knowledge of	
			said report is tru		t. Executed	this the 1st		glay of No	ovember	1 -	, 20 14	
		Witness	(if any)		KANSA	Receive IS CORPORATION WOV 17	V COMMUS	rich	ud for	Company M	lle-	
						NOV 17	ZU14					

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 LOBO PRODUCTION, 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 BRINEY 3-33
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:
Signature: Buland A. Millo Title: OWNER/OPERATOR

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.