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

Type Test	t:		0.12		(	See Instruct	ions on Reve	erse Side	)				
_ ·	en Flow liverabil				Test Date 07/31/20				API I 15-1	No. 15 1 <b>81-20</b> 016	6 <b>- 0000</b>		
Company LOBO	, PROE	UC	TION, IN	C.			Lease SCHWE	NDEN	IER	•	1-34	Well Number	
County SHERMAN			Locati C NE		Section 34			P RNG (E/W) S 39W		V)		Acres Attribut	ied
Field GOOD!	LAND	GA	S FIELD	Reservoir Gas Gathering Connection LOBO PRODUCTION, INC.  Plug Back Total Depth Packer Set at									
Completic 6/11/75					Plug Bac 1120'	k Total Dept	h		Packer Se	et at			
Casing Size 4.5			Weigh	t	Internal Diame		Set at 1126'		Perforations 1025		™ 1045		
Tubing Si	ize		Weigh	t	Internal [	Diameter	Set at		Perfor	ations	То		
Type Con SINGLE	•	•	scribe)			d Production			Pump Uni	t or Traveling NO		/ No	
Producing Thru (Annulus / Tubing) CASING				% C	% Carbon Dioxide			% Nitroge	en	Gas Gravity - G <sub>a</sub> .5877			
Vertical Depth(H) TD = 1135'					Pressure Taps						Run) (Prover) ETER RUN		
Pressure Buildup: Shut in 07/31			31 2	14 at 1	130	(AM) (PM) 1	PM) Taken 08/01		20	14 <sub>at</sub> 1325	(AM) F	-M)	
Well on L	ine:	S	tarted	2	0 at		(AM) (PM) 1	aken		20	at	(AM) (F	°М) 
						OBSERVE	D SURFACE	DATA			Duration of Shut	25.92	Hours
Static / Dynamic Property	Orific Size (inche	F	Circle one: Meter Prover Pressu pslg (Pm)	Pressure Differential In Inches H <sub>2</sub> 0	Flowing Temperature t	Well Head Temperature t	Casin Wellhead P (P <sub>w</sub> ) or (P <sub>t</sub> )	ressure	Wellhea	tbing d Pressure (P <sub>1</sub> ) or (P <sub>c</sub> )	Duration (Hours)	Liquid Produ (Barrels)	
Shut-In							17	<b>F</b> =	(1-13				
Flow			<del></del>	]							_		
			<del></del>	<del> </del>	<del></del>	FLOW STR	EAM ATTRIE	UTES					
Plate Coeffiecient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		٨	fircie one: Meter or er Pressure psia	Press Extension ✓ P <sub>m</sub> x h	Grav Faci F <sub>s</sub>	tor T	Flowing Temperature Factor F <sub>1t</sub>		ation ctor :	Metered Flow R (Mcfd)	v GOR (Cubic Fo Barrel	eet/ Flu	uid vity
(P <sub>c</sub> ) <sup>2</sup> =		:	(P <sub>w</sub> ) <sup>2</sup> =	:	(OPEN FLO		ERABILITY)		ATIONS 14.4 =	:		) <sup>2</sup> = 0.207	
(P <sub>c</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup> or (P <sub>c</sub> ) <sup>2</sup> - (P <sub>d</sub> ) <sup>2</sup>		(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>		Choose formula 1 or 2  1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w$	formula 1 or 2:  P <sub>c</sub> <sup>2</sup> - P <sub>a</sub> <sup>2</sup> formula P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> 1. or 2. and divide		Backpressure Slope = "r		n x LOG		Antilog	Open Flow	
			+		<u> </u>							<u> </u>	
Open Flo	w			Mcfd @ 14.	65 psia		<u> </u>	ity			Mcfd @ 14.65 ps	_! sia	
The	undersig	jned	authority, or	n behalf of the	Company, s	tates that h	e is duly auti	norized to	make the	above repo	ert and that he h	as knowledge	of
			, and that sa	aid report is true	e and correc	t. Executed		-4		ovember	1. Mi	ll~ 14	
			Witness (i	any)		MONO OURP	OIVATION COMM	ISSION		For	Company		

	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request							
	t status under Rule K.A.R. 82-3-304 on behalf of the operator LOBO PRODUCTION, INC.							
	at the foregoing pressure information and statements contained on this application form are true and							
	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.								
	ereby request a one-year exemption from open flow testing for the SCHWENDENER 1-34							
jas we	Il 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							
	rther agree to supply to the best of my ability any and all supporting documents deemed by Commissi							
staff as	necessary to corroborate this claim for exemption from testing.							
Date: _	11/01/2014							
	Signature: Ruband A. Miller							
	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.