KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	: en Flov	N	J		(See Instruci	ions on Reve	erse Side)			^	
Deliverabilty					Test Date: 08/28/2014			API No. 15 15-129-21276-0001					
Company MERIT E		GY (COMPANY		00,20,2	, i +	Lease CALLAH	AN A				Vell Number 1	
County MORTON			Location 1980' FSL & 1980 FEL		Section 33		TWP 32S		RNG (E/W) 40W		Acres Attributed 640		d
Field CIMARRON VALLEY			.EY		Reservoir UPPER	MORROV	<i>i</i>		Gas Gat	ering Conne	ction		
Completion Date 07/01/1994		9			Plug Back Total Dept 5430'		h	Packer S NA		et at			
Casing Size 5.5			Weight 15.5#		Internal Diameter 4.95		Set at 5732		Perforations 5232		To 5248		
Tubing Size			Weight		Internal E	iameter	Set at 5330		Perforations NA		To NA		
2.375 Type Completion (I		ı (De	4.7		1.995 Type Fluid Production		5339		NA Pump Unit or Traveling F		NA Plunger? Yes / No		
SINGLE GAS			жи		CONDENSATE/				YES		Flunger: 165 / NO		
Producing	_	(Anr	nulus / Tubing)	% C	arbon Dioxi	de		% Nitroge	en	Gas Gra	ıvity - G _g	
Vertical D	epth(H)				Pres: FLA!	sure Taps NGE				(Meter F 4	lun) (Prover) S	ize
Pressure Buildup:		o; ;	Shut in 08/27/2014 20		at_10:00 AM		(AM) (PM) Taken 08		1/28/2014 20 _		at _10:00 AM _(AM)		—— М)
Well on L	ine:		Started	20	0 at		(AM) (PM) 1	aken		20	at	(AM) (PI	M)
			-	· 		OBSERVE	D SURFACE	DATA			Duration of Shut-i	n_24	lours
Static / Orifice Dynamic Size Property (inches		Э	Circle ane: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t t		(P _w) or (P ₁) or (P ₀)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)	Liquid Produc (Barre!s)	ed
Shut-In	.75		paig (FIII)	IIICIIOS H ₂ O			psig 22	psia	psig	psia	24		
Flow												-	
						FLOW STR	EAM ATTRIE	BUTES					
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Extension Fact		or Temperature		ation ctor : pv	Metered Flow R (Mcfd)	GOR (Cubic Fee Barrel)	Flowi Flui Grav G _m	d ity
(P _c) ² =]		(P)²=	:	,	• •	ERABILITY)		ATIONS 14.4 =		(P _a)² (P _d)²	= 0.207	
(P _c) ² - (P _a) ² or (P _c) ² - (P _d) ²				Choose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide	P _c ² -P _w ²	Backpressure Cu Slope = "n"		n x I	og [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
Open Flo					SE polo	<u> </u>	Delivershill				4-1-1 @ 44 05		
Open Flo			d and the arter	Mcfd @ 14.		datas the r	Deliverabili	-			Mcfd @ 14.65 psi		
				n behalf of the aid report is true							t and that he ha	s knowledge o , 20 <u>14</u>	
						Received RPORATION C			•	T ENED	GY COMPA	NV	
			Witness (ii	any)	DE	C 112	014 .1	ANNA	BURT	For C	ompeny seed by	stor	
			For Comm	ission	CONSE	RVATION DIV VICHITA, KS				(Dec	ked 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 MERIT ENERGY COMPANY
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 CALLAHAN A #1
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: 12/05/2014
Signature: JANNA BURTON Jama Buton Title: REGULATORY ANALYST

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.

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