KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Rev	erse Side,)				
Open Flow			Took Date	Test Date:			ΛĐΙ	No. 15					
Deliverabilty				12-8 thru 12-9, 2014				007-10280-0	00-00				
Company HERMAN L. LOEB, LLC				Lease TRICE A					1	Well Number			
County Location BARBER SW SW NE SE			Section TWP 9 33S				RNG (E/W) 13W			Acres Attributed			
Field MEDICINE LODGE-BOGGS					Reservoir MISSISSIPPIAN			Gas Gathering Connection ATLAS					
Completion Date 9-16-1944				Plug Bac 4719	Plug Back Total Depth 4719			Packer S NONE	Set at				
Casing Size 7.000			Weight 24.00			Internal Diameter 6.336		Set at 4640		rations	To 46	To 4673'	
Tubing Size			Weigh	t	Internal I	Diameter	Set at		Perfo	Perforations		То	
Type Completion (Describe) SINGLE					Type Fluid Production GAS, WATER			Pump Unit or Traveling Plunger? Yes / NFLOWING			/ No		
Producing Thru (Annulus / Tubing) CASING				% C	% Carbon Dioxide				en	Gas Gr	avity - G _g		
Vertical D		1)				Pres	sure Taps				(Meter i	Run) (Prover) Size	
Pressure	Buildu	ıp:	Shut in 12-	8 2	0_14_at_1	2:20 PM	(AM) (PM)	Taken_12	:-9	20	14 at 12:20	PM (AM) (PM)	
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)	
				1		OBSERVE	D SURFACE				Duration of Shut-	in 24 Hours	
Static / Orifice Dynamic Size Property (inches)		e	Circle one: Pressure Meter Differential Prover Pressure psig (Pm) Inches H ₂ 0		Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P ₁) or (P ₀) psig psia		Welihe	Tubing ad Pressure r (P _t) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In			F=-0 (* ····)				25	psia	psig	psia	24		
Flow]					<u> </u>	
				<u> </u>		FLOW STE	REAM ATTRI	BUTES					
Plate Coefficcient (F _b) (F _p) Mcfd		Pro	Circle one: Meter ot wer Pressure psia	Press Extension ✓ P _m x h	Gravity Factor F		Flowing Temperature Factor	Deviation Factor F _{pv}		Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)	Gravity	
(P _c) ² =			(P _w)² =	•	(OPEN FL	• •	'ERABILITY) % (P.	CALCUL - 14.4) +		•	(P _a) (P _d)	² = 0.207	
(P _c) ² - (I	-	(F	P _c) ² - (P _w) ²	Choose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_a^2$ division by: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide		Backpres Slope Assi	sure Curve = = "n" or gned rd Slope	пх	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
					ļ								
Open Flo	 w			Mcfd @ 14.	65 psia		Deliverabil	ity			Mcfd @ 14.65 ps	ia.	
		ianer	1 authority o			etates that h	-	<u>-</u>	make #		rt and that he ha		
		•	•-	aid report is true			-			ECEMBER	A and that no ha	, 20 <u>14</u>	
			1000 m	1003			C WICE			Viat	A Sompany		
			Witness (DEC	16 201	4		·			
			For Comm	ission						Che	cked by		

I declare under penalty of perjury	under the laws of the state of Kansas that I am authorized to request							
	304 on behalf of the operator HERMAN L. LOEB, LLC							
	mation and statements contained on this application form are true and							
correct to the best of my knowledge ar	nd belief based upon available production summaries and lease records							
• •	ype of completion or upon use being made of the gas well herein named. ption from open flow testing for the TRICE A1							
gas well on the grounds that said well:								
(Chaok ana)								
(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								
=	present time; KCC approval Docket No							
	roducing at a daily rate in excess of 250 mcf/D							
I further agree to supply to the be	st of my ability any and all supporting documents deemed by Commission							
staff as necessary to corroborate this	claim for exemption from testing.							
Date: 12-11-2014								
KCC WICHITA	Signature: Man Viatel							
KCC WICHITA DEC 16 2014								
	Title: REP. HERMAN L. LOEB, LLC							
RECEIVED	IIIIe:							

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.