KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instri	uct	tions on Reve	rse Side)						
Op	en Flo	W			Test Date	٠.				ΔPI	No. 1	5				•
De	iveral	bilty				u 12-4, 2	201	14				22675-0	00-00			
Company		_OEI	B, LLC					Lease MEE						2	Well No	ımber
County BARBER	R		Loca SW N	tion E NE SE	Section 27			TWP 32S		RNG (E/	W)				Acres	Attributed
Field MEDICII	NE LO	DDG	E-BOGGS	;	Reservoir MISSIS	r SIPPIAN	ı	·		Gas Gat		Conn	ection			
Completion 9-19-200		te			Plug Bac 4500	k Total De	ept	th		Packer S NONE	et at			-		
Casing S 4.500	lize		Weig 10.5		Internal 5 4.052	Diameter		Set at 4517		Perfo 443		s		To 4448		-
Tubing Si	ize	-	Weig 4.70	ht	Internal E 1.995	Diameter		Set at 4494		Perfo	ration	S		То		
Type Con		n (D	escribe)		Type Flui	d Product				Pump Ur			Plung	ger? Yes	/ No	
	g Thru	(An	nulus / Tubii	ng)		arbon Did		de		% Nitrog				Gas Gr	avity -	G _g
Vertical D		H)		·		Pr	ess	sure Taps						(Meter	Run) (P	rover) Size
Pressure	Buildi	ıo:	Shut in 12	!-3 2	14 _{at} 2	:00 PM		(AM) (PM) T	aken 12	2-4		20	14	2:00 P	M	(AM) (PM)
Well on L		•		2												
				<u> </u>		OBSER	VEI	D SURFACE	DATA				Durat	ion of Shut-	in 24	Hours
Static / Dynamic Property	Orif Siz (inch	ze	Prover Pressure In		Flowing Temperature t	emperature Temperature			Casing Wellhead Pressure (P,) or (P,) or (Pc)			Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)			Liquid Produced (Валтеls)	
Shut-In			psig (Pm) Inches H ₂ 0				110	psia	psig	-	psia	24		 	
Flow																
						FLOW S	TR	EAM ATTRIB	UTES	•						
Plate Coeffiect (F _b) (F Mcfd	ient _p)	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fact	tor	Ti	Flowing remperature Factor F ₁₁	Fa	iation ctor : p*		tered Flow R (Mcfd)	•	GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
				1	(OPEN FLI	OW) (DEL	IVI	ERABILITY) (CAL CUI	ATIONS						<u> </u>
(P _c) ² =		_:	(P_)2		P _d ⊨			•	- 14.4) +			_:_		(P _a)	2 = 0.2 2 =	
(P _c) ² - (F or (P _c) ² - (F	-	(F)²- (P_)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		Backpress Stope Stope Assig Standar	= "n" r jned	nxl	.og		,	Antilog	Del Equals	oen Flow iverability s R x Antilog (Mcfd)
													_			
Open Flor	w			Mcfd @ 14.	65 psia			Deliverabilit	ty				Mcfd (Ø 14.65 psi	 a	
The u	unders	igne	authority,	on behalf of the	Company, s	tates that	t he	e is duly auth				•	ort and	that he ha	s know	ledge of
the facts st	tated t	herei	n, and that s	said report is true						day of D	ECE /	MBER	!		·	20 14 .
			Witness	(if any)	K	CC N	/[CHITA-	All	m k	La.	the	Сотрелу			
			For Com		0	EC 1	6	2014 —					cked by			· -
						~~ ~							•			

RECEIVED

	under the laws of the state of Kansas that I am authorized to request 304 on behalf of the operator HERMAN L. LOEB, LLC
	nation and statements contained on this application form are true and
	d belief based upon available production summaries and lease records
	rpe of completion or upon use being made of the gas well herein named.
I hereby request a one-year exemp	tion from open flow testing for the MEE 2
gas well on the grounds that said well:	
(Check one)	
is a coalbed methan	ne producer
is cycled on plunger	
	al gas for injection into an oil reservoir undergoing ER
<u></u>	present time; KCC approval Docket No.
is not capable of pro	oducing at a daily rate in excess of 250 mcf/D
I further agree to cumply to the bee	t of my ability any and all supporting documents deemed by Commission
staff as necessary to corroborate this	· · · · · · · · · · · · · · · · · · ·
stan as necessary to corroborate this t	sam to exemption from testing.
Date: 12-11-2014	
KCC WICHITA	Signature: Alan Wall
KCC WICHITA DEC 16 2014	
DEC 16 2014	Title: REP. HERMAN L. LOEB, LLC

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.