KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:				(See Instruct	ions on Reve	erse Side)			
Ор	en Flov	v			Test Date				ADI	No. 15		
Del	liverabi	lty			09/06/20					75-21346-0	001	
Company MERIT E		GY (COMPANY				Lease UNDERV	VOOD A	١		3	Well Number
County SEWARD			Location 660' FSL & 660' FEL		Section 23		TWP 34S		RNG (E/W) 34W			Acres Attributed 640
Field ADAMS0	 ON				Reservoir LOWER	MORROV	٧		Gas Gath	ering Conne	ection	
Completic 10/14/20		9			Plug Back 6443'	k Total Dept	h		Packer S NA	et at		
Casing Si 5.5	ze		Weight 15.5#		Internal D 4.95	iameter	Set at 6700		Perfor 6146		то 6150'	. 10.00-1
Tubing Size 2.375			Weight 4.7#		Internal D 1.995		Set at 6120		Perforations NA		To NA	
Type Con SINGLE			escribe)		Type Flui	d Production	1		Pump Un NO	it or Traveling	Plunger? Yes	/ No
Producing		(Anr	rulus / Tubing)	% C	arbon Dioxi	de		% Nitroge	on .	Gas Gra	avity - G _g
Vertical D	epth(H)		1.200.0	a. a.a.	Pres FLA	sure Taps VGE				(Meter F 3	Run) (Prover) Size
Pressure	Buildup	p: :	Shut in09/(05/2014 2	0at_9	:30 AM	(AM) (PM)	Taken 09	9/06/201	4 20	at_9:30 A	M(AM) (PM)
Well on L	ine:	;	Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
					ı-	OBSERVE	D SURFACE		1 _		Duration of Shut-	in 24 Hours
Static / Dynamic Property	Orific Size (inche	Э	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential re in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Casir Wellhead P (P _w) or (P _t)	ressure	Wellhea	ubing id Pressure (P ₁) or (P _c) psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In							40.0	·		·	24	
Flow												
						FLOW STR	EAM ATTRII	BUTES	 -			
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle ano: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Extension Fac		Flowing Temperature Factor F _{f1}	Deviation Factor F _{pv}		Metered Flov R (Mcfd)	y GOR (Cubic Fe Barrel)	Flowing Fluid Gravity G _m
			•									
							ERABILITY)					² = 0,207
(P _c) ² =		<u>-:</u> _	(P _w) ² =	Choose formula 1 or 2	P _d =			- 14.4) +		: :	(P _d)	'= T
(P _c)²- (I or (P _c)²- (I	- I	(F	P _c) ² - (P _w) ²	1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w$	LOG of formula 1, or 2, and divide	P _c ² - P _w ²	Slope Assi	sure Curve e = "n" origned rd Slope	n x i	og	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
-												
				<u> </u>								
Open Flo	w		_ _	Mcfd @ 14	.65 psia		Deliverabi	lity			Mcfd @ 14.65 ps	a
		-	-				•			e above repo ECEMBER	rt and that he ha	_
tne tacts s	tated ti	nerei	n, and that sa	id report is tru	e and correc	t. Executed Received		. 10			GY COMPA	, 20 <u>14</u>
	·		Witness (i	any)	KANSAS-C	ORPORATION	COMMISSION -	IANNA	BUR	For 0	Company	714 I
			For Comm	ission	— Di	EC 29 2	2014 -		. 5010		Harma Di	m

CONSERVATION DIVISION WICHITA, KS

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 UNDERWOOD A 3
gas well on the grounds that said well:
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: 12/22/2014
Signature: JANNA BURTON Jama Burton 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.