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

Type Tes	it:				(	See Instruct	ions on Rev	erse Side	9)				
Op	en Flo	w			Test Date	1:			API	No. 15			
<b>₽</b> De	eliveral	oilty			11-7-20				15-	119-21284	-00-00	<b>5</b>	
Company Claasse	y en Oi	and	l Gas, Inc				Lease Ida Heir	nson			10	Well Nu	ımber
County Location  Meade 2330 FSL & 2310 FEL			Section 29		TWP 33S		RNG (E/W) 29W			Acres Attributed 160			
Field Singley				Reservoir St. Louis			Gas Gathering Connection DCP Midstream						
Completion Date 4-8-2011			Plug Back Total Depth 6285			Packer Set at None							
Casing S 1.5	asing Size Weight 5 10.5			t	Internal 0 4.052	Diameter	Set at 6400		Perforations 6264		т <sub>о</sub> 6272		
Tubing Size 2.375			Weight 4.7		Internal Diameter 1.995		Set at 6215		Perforations		То		
Type Cor Single (		n (De	scribe)		Type Flui Oil	d Production	1	-	Pump Ur Pump	it or Traveling Unit	Plunger? Yes	)/ No	
Producing	-	(Anr	ulus / Tubin	g)	% C	arbon Dioxi	de		% Nitrog	en	Gas G	ravity -	G,
Vertical D		∃)				Press	sure Taps	_			(Meter	Run) (P	rover) Size
Pressure	Buildu	ıp; !	Shut in 11-	6 2	0 144 at 1:	40	(AM) (PM)	Taken_11	-7	20	14 at 2;00		(AM) (PM)
Well on L	.ine:										at		_
						OBSERVE	D SURFACE	DATA			Duration of Shu	25	Hou
Static / Orifice Dynamic Size Property (inches		e i	Meter Ditte		Flowing Well Head Temperature t t		(P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> )		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Duration (Hours)	Liquid Produced (Валеіз)	
Shut-In			- Paig (:)	Inches H <sub>2</sub> 0			120	psia	psig 0	psia	25		<del></del> -
Flow													
				<del></del> _		FLOW STR	EAM ATTRI	BUTES					
Plate Coefficcient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter ot Prover Pressure psia		Press Extension	Extension Fact		Flowing emperature Factor F <sub>ft</sub>	Deviation Factor F <sub>pv</sub>		Metered Flow R (Mcfd)	GOR (Cubic F Barrel	eet/	Flowing Fluid Gravity G <sub>m</sub>
				<u> </u>	(ODEN SI	OWA (DEL IVI	ERABILITY)	CAL CILL	ATIONS		l		<u></u>
(P <sub>c</sub> )² =		_:_	(P_) <sup>2</sup> =		P <sub>d</sub> =		-	- 14.4) +		<u></u> :		) <sup>2</sup> = 0.2 ) <sup>2</sup> =	:07 
(P <sub>c</sub> ) <sup>2</sup> - ( or (P <sub>c</sub> ) <sup>2</sup> - (		(P	P <sub>c</sub> )²- (P <sub>w</sub> )²	Choose formula 1 or 2:  1. P <sub>o</sub> <sup>2</sup> - P <sub>a</sub> <sup>2</sup> 2. P <sub>o</sub> <sup>2</sup> - P <sub>o</sub> <sup>2</sup> divided by: P <sub>o</sub> <sup>2</sup> - P <sub>o</sub> <sup>2</sup>	LOG of formula 1. or 2. and divide	b.s. b.s	Backpressure Curve Slope = "n" or Assigned Standard Slope		nxl		Antilog Recei ANSAS CORPORAT	Open Flow Deliverability Equals R x Antilog Ved (Mcfd)	
								<del></del>	-		NOV 2	2014	
Open Flo	w	_		Mcfd @ 14.	65 psla		Deliverabil	lity			CONSERVATION Mote @ WACESTRS	DIVISIO	N
The	unders	ignec	authority, o	n behalf of the	Company, s	tates that h	e is duly aut			e above repo	rt and that he h		ledge of
ie facts s	stated t	herei	n, and that sa	ald report is true	and correc	t. Executed	this the 15			ovember		,	20 14
	Lls	M	OL K		sen		_	Dan	riel_1		ratu ompany		
			For Comm	ission			_			Chec	ked by		

I declare under penalty of perjury under the exempt status under Rule K.A.R. 82-3-304 on beha	laws of the state of Kansas that I am authorized to request alf of the operator Claassen Oil and Gas, Inc.
and that the foregoing pressure information and correct to the best of my knowledge and belief bas	statements contained on this application form are true and sed upon available production summaries and lease records oletion or upon use being made of the gas well herein named.
is a coalbed methane produced is cycled on plunger lift due to is a source of natural gas for in is on vacuum at the present tim is not capable of producing at	water  njection into an oil reservoir undergoing ER  ne; KCC approval Docket No  a daily rate in excess of 250 mcf/D  lity any and all supporting documents deemed by Commission
Date: 11-15-2014	Received kansas corporation commission  NOV 2 4 2014  CONSERVATION DIVISION WICHITA, KS
	itle: President

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.