KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:						((See Instructions on Reverse Side)											
Open Flow						Test Date: AP					No	15						
Deliverabilty						12/18/1	_		API No 047-00					00				
Company Oil Producers,Inc.of Kansas						Lease Risse									Well Number			
County Location Edwards SESESE					Section 34	TWP 24S	. , ,				Acres Attributed							
Field					Reservoi Mississi						ring Connection County Gas Company							
Completion Date 11/58					Plug Bac 4600	pth	h Packer Set none			at								
Casing Size Weight 5.5					Internal I		Set at 4654			rati 8	ons To 4324							
Tubing Size Weight 2.375				·	Internal [Set at 4300			rati	ons	s To						
Type Completion (Describe) single					Type Flui	on				or Traveling Plunger? Yes / No								
Producing Thru (Annulus / Tubing) annulus					% C	xide					1				· G _g			
Vertical D		1)	_ 		- <u>-</u>	Pressure Taps									(Meter Run) (Prover) Size			
Pressure	Buildu	ıp:	Shut in _12	2/17	2	0_14_at_9	:00 am	 _ (AM) (Pi	VI)	Taken_12	/18		20	14	9:00 a	m		
Well on Line:					2	at		_ (AM) (PN	M)	Taken	aken		20					
							OBSERV	ED SURFA	\CE	DATA				Durat	ion of Shut-	in_2	4 Hours	
Static / Orlfice Dynamic Size Property (inches		:0	Meter Prover Pressur		Pressure Differential in	Flowing Temperature	Well Head Temperatur	Wellhe	Casing Wellhead Pressure (P_w) or (P_1) or (P_0)		Tubin Wellhead P (P _w) or (P ₁)		ressure		Duration (Hours)	Liquid Produced (Barrels)		
	(1830)	165)	psig (Pm)	Inches H ₂ 0	- '		psig	1	psia	psig		psia				 	
Shut-In Flow	'			_				154.4	+	168.8		+	<u> </u>	24		 -		
							ELOW ST	DE ARA AT	~~,				<u> </u>			_!		
			Circle one:	T		 _	FLOW ST	REAM AT	ıĸı	Bules			<u> </u>					
Plate Coeffictient (F _b) (F _p) Mcfd		Meter or (Prover Pressure psia			Press Extension	Grav Fact	tor	Flowing Temperature Factor F _{it}		Fac	Deviation 1 Factor F _{pv}		etered Flow R (Mcfd)	v 	GOR (Cubic Feet/ Barrel)		Flowing Fluid Gravity G _m	
				7	_	-		<u> </u>							- 7.0			
					***	(OPEN FL	OW) (DELI	VERABILI	TY)	CALCULA	ATIONS				– (P _a)	² = 0	.207	
(P _c) ² =	<u></u> -	_:	(P _w) ²		:			_%	(P	- 14.4) +	14.4 =		<u> </u>		(P _d)	² =		
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _c) ² - (P _w) ²		1	se formula 1 or 2; . P _c ² - P _a ² . P _c ² - P _d ² ad by: P _c ² - P _c ²	LOG of formula 1, or 2, and divide	formula 1, or 2, and divide p 2 p 2		Backpressure Curv Slope = "n"or Assigned Standard Slope			e n x LOG			Antilog		Open Flow eliverability als R x Antilog (Mcfd)	
					<u> </u>													
						<u></u>						-	<u> </u>					
Open Flov	N				Mcfd @ 14.	65 psia	_	Deliver	abi	lity			<u> </u>	Mold	@ 14.65 ps	а		
The u	unders	igned	d authority,	on be	ehalf of the	Company, s	tates that	he is duly	au				1	rt and	that he ha			
the facts st	tated t	herei	n, and that s	said r	eport is true	and correc	REC	d this the _ CEIVED RATION COM			ay of D	ece / ol	mper	٠.٠			, 20 <u>14</u> .	
			Witness	(If any)	CHIVI	· · · · · · · · · · · · · · · · · · ·	1 5 2015	-				For C	ompany	-	7		
			For Con	missio	n								Chec	ked by				
						C	ONSERV OM	ATION DIV HWTA, KS	VIS									

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 Oil Producers Inc.of Kansas 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 Risse #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:
RECEIVED KANSAS CORPORATION COMMISSION Signature: JAN 15 2015 CONSERVATION DIVISION WICHITA, KS

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.