

Form G-2
(Rev. 2003)

KANSAS CORPORATION COMMISSION

ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test: Open Flow Deliverability (See instructions on Reverse Side)

Test Date: _____ API No. 15 15-047-10, 061-0001

Company: Jerry Anderson Lease: Huter # 1-25 Well Number: # 1-25

County: Edwards Location: NW NE 25-245-16W RNG (E/W): _____ Acres Attributed: _____

Field: Edwards Reservoir: Kinderhook Sand Gas Gathering Connection: Sem Gas

Completion Date: March 27, 1975 Plug Back Total Depth: _____ Packer Set at: 4275 4281

Casing Size: _____ Weight: _____ Internal Diameter: _____ Set at: _____ Perforations: _____ To: _____

Tubing Size: _____ Weight: _____ Internal Diameter: _____ Set at: _____ Perforations: _____ To: _____

Type Completion (Describe): Single Gas Type Fluid Production: Salt Water Pump Unit or Traveling Plunger? Yes No

Producing From (Annulus / Tubing): Annulus % Carbon Dioxide: _____ % Nitrogen: _____ Gas Gravity - G_s: _____

Vertical Depth(H): _____ Pressure Taps: _____ (Meter Run) (Prover) Size: _____

Pressure Buildup: Shut in 04 03 2015 at 6:00 (AM) (PM) Taken _____ 20 _____ at _____ (AM) (PM)

Well on Line: Started 04 04 2015 at 6:30 (AM) (PM) Taken _____ 20 _____ at _____ (AM) (PM)

OBSERVED SURFACE DATA

Static / Dynamic Property	Orifice Size (Inches)	Orifice and Meter Prover Pressure psig (Pm)	Pressure Differential in Inches H ₂ O	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P _c) or (P _{cs})		Tubing Wellhead Pressure (P _w) or (P _t) or (P _{ts})		Duration (Hours)	Liquid Produced (Barrels)
						psig	psia	psig	psia		
Shut-in						36					
Flow											

FLOW STREAM ATTRIBUTES

Plate Coefficient (F _p) (F _{ps}) Modif	Orifice and Meter or Prover Pressure psia	Press Extension $\sqrt{P_m \times h}$	Gravity Factor F _g	Flowing Temperature Factor F _t	Deviation Factor F _{dv}	Metered Flow R (Mcf/d)	GOR (Cubic Feet/ Barrel)	Flowing Fluid Gravity G _s

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

(P₁)² = _____ (P₂)² = _____ P₁ = _____ % (P₂ - 14.4) + 14.4 = _____ (P₁)² = 0.207 (P₂)² = _____

(P ₂) ² - (P ₁) ² or (P ₁) ² - (P ₂) ²	(P ₁) ² - (P ₂) ²	Choose formula 1 or 2: 1. P ₁ - P ₂ 2. P ₁ - P ₂ divided by P ₁ - P ₂	LOG of formula 1, or 2, and divide by: P ₁ - P ₂	Backpressure Curve Slope = "n" or Assigned Standard Slope	n x LOG	Antilog	Open Flow Deliverability (Mcf/d)

Open Flow _____ Mcfd @ 14.65 psia Deliverability _____ Mcfd @ 14.65 psia

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the 18 day of April, 20 15.

Witness in my presence: _____ For Commission

Signature: [Signature] For Company

Checked by: _____

Received
KANSAS CORPORATION COMMISSION
MAY 01 2015
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 Jerry Anderson 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 Hydr # 1-25 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: 4-18-2015

Signature: [Handwritten Signature]
Title: Owner

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MAY 01 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.