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

Type Test	:					(	See Instru	ctions	on Re	verse Sid	le)							
Open Flow						Took Date:						ADI M	- 45					
Deliverabilty						Test Date 4/23/15	<b>)</b> :		API No. 15 175-21,851 <b>~ () () ()</b>									
Company Oil Produ		inc.	of Kansas						Lease McVey A					Well Number				
County Location Seward SE/SE/NW						Section 12			TWP 33S			RNG (E/W)		Acres Attributed				
Field Lismet					Reservoir Krider			Gas Gathering C DCP			ring Conne	ection			Ka			
Completion Date 08/01					Plug Back Total Depth 2848			ח			Packer Set		-		W. Ch			
Casing S 4.5	Casing Size Weight 4.5					Internal Diameter			Set at 2875			Perforat		To 2621				
Tubing Si 2.375	Tubing Size Weight					Internal Diameter			Set at 2678			Perforat	,	То		MAY 18 RECEIVE		
Type Completion (Describe) single						Type Fluid Production oil/sw						Pump Unit or Traveling Plut yes-pumping unit			Yes	/ No	5-18	
	Thru	(Anr	nulus / Tubir	ıg)		% C	arbon Dio	cide	% Nitrogen					Gas Gra	avity -	((		
annulus	<u> </u>										-							
Vertical D	epth(F	1)		-	-		Pre	ssure	Taps			•			(Meter F	lun) (F	rover) Size	
Pressure	Buildu	p: \$	Shut in	22	20	15 at 1	1:45 am	_ (AM	1) (PM)	Taken_4	/23	3	20	15 at 1	1:45 a	am	(AM) (PM)	
Well on L	ine:	!	Started		20	at		_ (AM	l) (PM)	Taken_			20	at _			(AM) (PM)	
							OBSERV	ED SI	URFAC	E DATA	,			Duration e	of Shut-i	<sub>n_24</sub>	Hours	
Static / Dynamic Property	ic Size		Circle one: Meter Prover Pressure		Pressure Differential in	Flowing Temperature t	Well Head Temperature	el W	Casing Wellhead Pressure $(P_w) \propto (P_l) \propto (P_c)$			Tubing Wellhead Pressure $(P_w) \text{ or } (P_l) \text{ or } (P_c)$		Duration (Hours)		Liquid Produced (Barrels)		
Shut-In		_	psig (Pm)		Inches H <sub>2</sub> 0			7	psig psia 27.6 42.0		+	psig psia		24		<del></del>		
Flow			-				-	1			┪		-					
							FLOW ST	REAM	ATTE	IBUTES								
Plate Coefficient $(F_b)(F_p)$ Mcfd		Ctreto ono: Meter or Prover Pressure psia			Press Extension ✓ P <sub>m</sub> x h	Grav Fact F <sub>s</sub>	tor	Flowing Temperature Factor F <sub>11</sub>		Deviati Facto F <sub>p+</sub>		lor R		GOR (Cubic Fer Barrel)		eV	Flowing Fluid Gravity G	
-				<u> </u>		(OPEN FLO	) (DELIV	VERA	ВІГЦА	CALCU	LAT	TONS		!	(D. \2		1	
(P <sub>c</sub> ) <sup>2</sup> =		_:	(P <sub>₩</sub> )² :		:	P <sub>d</sub> =		%	(1	P <sub>c</sub> - 14.4)	+ 14	4.4 =	:		(P <sub>d</sub> ) <sup>2</sup>	= 0.2 =_	.07	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>		Choose formula 1 or 2:  1. P <sub>c</sub> <sup>2</sup> -P <sub>a</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> -P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> -P <sub>w</sub> <sup>2</sup>		LOG of formuta 1, or 2. and divide by;	P.2-P.2	-	Backpressure Curve Slope = 'n'			n x LOG		Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)		
	_				<del></del> -	<del> </del>	2	+				-	_					
Open Flor			Mcfd @ 14.65 psia						Deliverability			·	4.65 psia					
				aid ı	ehalf of the (				-			Make the Apri	above repo	rt and tha		s know	dedge of 20 <u>15</u> .	
			For Com							4	Ö	au, 1	NC.	ompany tred by				
			ru com	. 00010	••								Unec	ked by				

## 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.