KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

e ends a

Type Test:		-	·	e	See Instruct	ions on Reve	erse Side)					
Open Flow				Toet Date	Test Date:								
Delive	erabilty			6-13&14	-				No. 15 0 <mark>95-21338-</mark> (00-00			
Company HERMAN L	L. LOEI	B,LLC.	Lease VOTH						#1	Well Number #1			
County KINGMAN		Locatio C SW N		Section 30		TWP 28S		RNG (E/	W)		Acres Attributed		
Field NEGRO CI	REEK S	SOUTH		Reservoir INDIAN				Gas Gat	hering Conn	ection			
Completion 5-20-83				Plug Back	k Total Dept	h		Packer S NONE	Set at				
Casing Size 4.500)	Weight 10.50	· · · · · · · · · · · · · · · · · · ·	Internal E 3.927	iameter	Set at 2108			rations	то 2030			
Tubing Size	1	Weight		Internal D	Diameter	Set at			rations	To			
2.375		4.70	· <u></u>	1,995	,	2065		OPE					
Type Completion (Describe) SINGLE					Type Fluid Production GAS,WATER			Pump Ur PUMP	it or Traveling	•	·		
Producing T		nulus / Tubing)		% C	% Carbon Dioxide			% Nitrog	en	Gas Gi	Gas Gravity - G _g		
Vertical Dep				<u>.</u>	Press	sure Taps	···			(Meter	Run) (Prover) Size		
2031		Shut in 6-13		. 15 7	<u> </u>	(ABA) (DBA) 3	6-	14		15 , 7	(AM) (PM)		
Pressure Bu Well on Line											(AM) (PM)		
					ADCEDUE	D SURFACE	DATA		-	D 11 151 1			
Static / C	Orifice	Circia ona:	Pressure	Flowing	Well Head	Casin		,	l ubing	Duration of Shut	-inHou		
Dynamic	Size (inches)	Meter Prover Pressur psig (Pm)	Differential e in Inches H ₂ 0		Temperature t	Wellhead P	or (P _c)	(P _w) o	ad Pressure (P _t) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)		
Shut-In		parg (Fili)	inches H ₂ 0			900 psig	psia	psig	psia	24			
Flow			-										
					FLOW STR	EAM ATTRIE	BUTES						
Plate Coefflecient (F _b) (F _p) Mcfd		Circlo one: Meter or over Pressure psia	Press Extension	Grav Fact F _s	or T	Flowing emperature Factor F _{II}	Fa	lation ctor	Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)	eet/ Fluid		
			•			A							
		<u> </u>		(OPEN FLO	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P.))2= 0.207		
(P₀)² =	<u>:</u>	(P _w) ² =_	<u></u> :	P _d =,	·°	% (Р _с	- 14.4) +	14.4 =	<u>:</u> -	· (P _d)			
(P _c) ² - (P _a) ² or (P _c) ² - (P _d) ²		P _c) ² - (P _w) ²	1. P _c ² -P _a ² 2. P _c ² -P _d ²	LOG of formula 1. or 2. and divide	P ₂ - P ₂	Slope 	sure Curve = "n" or gned	. nx	-oe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
		d	vided by: $P_c^2 - P_w^2$	by:	<u> </u>	Standar	a Slope	-			(MCIO)		
					•								
Open Flow	-		Mcfd @ 14.	65 psla	_	Deliverabili	ity			Mcfd @ 14.65 ps	ila		
	_			• •		-				rt and that he ha	-		
the facts state	ed therei	in, and that sai	d report is true	and correct	t. Executed	this the 14		day of J	JNE		, 2015		
		Witness (if	any)		-KC	C WICH	IITA-		Abro	Blo Company			
		For Commis	sion		JU	L 27 20	15			cked by	 -		

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I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to reques exempt status under Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L. LOEB, LLC 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 VOTH
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 Commiss staff as necessary to corroborate this claim for exemption from testing.
Date: 6-14-2015
Signature: Signature: Title: Formor RECEIVED

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.