KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	ctions on Rev	rerse Side	e)					
□ Ор	en Flo	W			T4 Date				ADI	N- 45				
Deliverability					Test Date: 7-15-15				API No. 15 071-20,217 0600					
Company W.R. W		ns, i	Inc.				Lease Coakes	 S				Well N	umber	
County Location Greeley SE/SE/SE			Section 7			TWP 17S		RNG (E/W) 40W		Acres 640	Attributed			
Field Byerly				Reservoir Towan			Gas Gathering Conduction Conducti		•	ection				
Completion 12-80	on Da	te			Plug Bac 3055	k Total Dep	oth		Packer S	Set at	,	·		
Casing Size Weight 4.5 10.5			Internal 0 4.052	Diameter		Set at . 3060		Perforations 2960						
Tubing Size 2.375			Weight 4.7		Internal Diameter 1.995		Set at 2990		Perforations		То			
Type Con Single (n (De	escribe)		Type Flui Water	d Production	on		Pump Ur Pump	nit or Traveling Unit	Plunger? Yes	/ No		
Producing Thru (Annulus / Tubing) Annulus				% C	arbon Diox	dde		% Nitrog	en	Gas G .848	Gas Gravity - G _g .848			
Vertical D	epth(l	H)				Pres	ssure Taps					Run) (F	Prover) Size	
3060_														
Pressure	Buildu										15 at 11:15		(AM) (PM)	
Well on L	ine:		Started	2	0 at		_ (AM) (PM)	Taken		20	at		(AM) (PM)	
			· · · ·			OBSERVI	ED SURFACE			_	Duration of Shut	_{-in} _12	0 Hours	
Static / Dynamic Property	Dynamic Size		Circle one: Meter Prover Press psig (Pm)		Flowing Well Heat Temperature t t		Wallhead Proceitro		Tubing Welihead Pressure (P _w) or (P ₁) or (P ₂) psig psia		Duration (Hours)	Liquid Produced (Barrels)		
Shut-In							1 - 1	312.4	psig	pola	120			
Flow														
						FLOW ST	REAM ATTRI	BUTES					<u>, </u>	
Plate Coeffiecient (F _b) (F _p) Mofd		Gircle one: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F _{ft}	Deviation Factor F _{pv}		Metered Flov R (Mcfd)	v GOR (Cubic Fo	et/	Flowing Fluid Gravity G _m	
(P _c) ² =		_:	(P)² :	=:	(OPEN FL	- •	VERABILITY) _% (P	CALCUL - 14.4) +		:	(P _a)) ² = 0.2	207	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(F	P _c) ² - (P _w) ²	Choose formula 1 or 2 1. P _c ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _w ²	LOG of formula 1, or 2, and divide	P.2-P.2	Backpres Slop Ass	ssure Curve e = "n" or signed ard Slope		og [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
					-				-			<u> </u>		
Open Flor	w			Mcfd @ 14.	65 psia		Deliverabi	lity			Mcfd @ 14.65 ps	ia		
							-		_		ort and that he ha		_	
the facts s	tated t	therei	n, and that s	aid report is true									20 15	
			Witness	(if any)	k	(CC-A	۷!С!:::5	<u>, D</u>	eke Da	niels For	Company		•	
	-		For Com	nission		JUL 2	1 2015 -			Cher	cked by			

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 W.R. Williams, Inc. 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 Coakes #7 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: 7-15-15
Signature: KCC WICH!TA Title: President
JUL 2 1 2015 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.