KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

Type Test	•				,	000 111511 401	טוז ווט פווטו	Vecide Cita	-,					
= '	en Flow liverabil				Test Date 4/16/20					No. 15 197-21386-	00-00			
Company Larson C		ng	Company				Lease Schmid	it				1-35	Vell Nu	mber
County Ki ŏwa			Locati NW SW	on /·SE SW	Section 35		TWP 29		RNG (EA	N)		Α	cres A	ttributed
Field Alford No	ortheas	 st			Reservoii Mississi			 	Gas Gath Oneok	nering Conn	ection		K	CIMO
Completic 4/26/199			-		Plug Bac 4950'	k Total Dept	h		Packer S N/A	et at			AU	605.20
Casing Si 5.5"	ize		Weigh	t	Internal [5.012"	Diameter	Set 504		Perfor			To 4916'	R	CEN
Tubing Si 2.875"	ze		Weigh 6.5#	t	Internal [2.441"	Diameter	Set 493		Perfor 4924			то 4927'		- VE(
Type Con pumping	•	(De	escribe)		Type Flui water (d Production	ו		Pump Un pumpir	it or Traveling	Plung	er? Yes	No No	
	_	Anr	nulus / Tubing	1)		arbon Dioxi	de		% Nitroge		_	Gas Gra	vity - G	ì _g
Vertical D	epth(H)					Pres	sure Taps				_	(Meter R	un) (Pi	over) Size
Pressure Well on L	•			6 2										
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Static / Dynamic Property	Orific Size (Inche		Circle one: Meter Prover Pressi psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head	Wellhead (P _w) or (F	sing I Pressure P ₁) or (P _c)	Wellhea (P _w) or	ubing id Pressure (P ₁) or (P _c)		on of Shut-i Juration Hours)	Liquid	Hours diProduced Barrels)
Shut-In			porg (, iii)	11,0103 1120			202	216	psig	psia	24		0	
Flow										'-			_	
						FLOW STR	EAM ATTR	RIBUTES						
Plate Coeffied (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or ver Pressure psia	Press Extension ✓ P _m xh	Grav Fact F _c	tor 1	Flowing Femperature Factor F _{It}	Fa	viation actor F _{pv}	Metered Flo R (Mcfd)	w .	GOR (Cubic Fee Barrel)	t .	Flowing Fluid Gravity G _m
<u> </u>	_					<u>'</u>	•							
(P _c) ² =		_:	(P _w)² =	<u>:</u>	(OPEN FL	OW) (DELIV		/) CALCU L P _o - 14.4) 4		:		(P _a)² (P _d)²	= 0.2 =	07
(P _c)² - (F		(F	(P _*)² - (P _*)²	Choose formula 1 or 2 1. P _c ² - P _s ² 2. P _c ² - P _d ² divided by: P _c ² - P _g	LOG of formula 1. or 2. and divide	P.2 - P.2	Slo As	essure Curve ope = "n" or ssigned dard Slope	n x i	og	,	Antilog	Deli Equals	en Flow verability B x Antilog (Mcfd)
Open Flor	W			Mcfd @ 14	.65 psia		Deliverat	bility			Mcfd (2 14.65 psia	<u> </u>	
				n behalf of the			_		to make the		ort and	that he has		ledge of 20 <u>15</u> .
			Wilness (i	any)			,		1 ///	For	Cernyany	عمما		
			For Comm	ission			•	- .	·	Che	cked by			

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 Schmidt #1-35 [Acceptage well on the grounds that said well: (Check one)			der the laws of the state of Kansas that on behalf of the operator Larson Operation	•
I hereby request a one-year exemption from open flow testing for the Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 AUG 05 AUG 05 RECEN Schmidt #1-35 AUG 05 Schmidt #1-35 Schmidt #1-35 AUG 05 Schmidt #1-35 AUG 05 Schmidt #1-35 Schmidt #1-35 Schmidt #1-35 Schmidt #1-3	and that the foreg	oing pressure information	on and statements contained on this ap	plication form are true and
I hereby request a one-year exemption from open flow testing for the Schmidt #1-35 Augustian Schmidt #1-35	correct to the best	of my knowledge and be	elief based upon available production sur	nmaries and lease records
(Check one) (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 Commissi	of equipment insta	llation and/or upon type	of completion or upon use being made of	the gas well herein named.
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I further agree to supply to the best of my ability any and all supporting documents deemed by Commissi		is on vacuum at the pre-	esent time; KCC approval Docket No	
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Date: 7/29/2015		to supply to the best of		ents deemed by Commission
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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.