

KANSAS CORPORATION COMMISSION

ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:

(See Instructions on Reverse Side)

- Open Flow
 Deliverability

Test Date:
8/11/2015

API No. 15
007-10.259-000

Company Baber Oil Company, LLC		Lease Boggs "J"		Well Number #1	
County Barber	Location SE/4 NW/4 NW/4	Section 4	TWP 33S	RNG (E/W) 12W	Acres Attributed 160A
Field Medicine Lodge-Boggs		Reservoir Mississippi		Gas Gathering Connection Targa Pipeline	
Completion Date 09/06/1955		Plug Back Total Depth 4,521'		Packer Set at 4,468'	
Casing Size 5 1/2	Weight	Internal Diameter	Set at 4,556'	Perforations 198	To 4,474' to 4,507'
Tubing Size 2 3/8"	Weight	Internal Diameter	Set at	Perforations	To
Type Completion (Describe) 500 gal acid & San-Oil-Frac		Type Fluid Production		Pump Unit or Traveling Plunger? Yes / No Pumping Unit	
Producing Thru (Annulus / Tubing)		% Carbon Dioxide		% Nitrogen	
Gas Gravity - G _g					
Tubing					
Vertical Depth(H) 4,556'		Pressure Taps		(Meter Run) (Prover) Size	
Pressure Buildup: Shut in August 10, 2015 at 1:00 PM (AM) (PM)		Taken August 11, 2015 at 1:00 PM (AM) (PM)			
Well on Line: Started 20 at		(AM) (PM) Taken 20 at		(AM) (PM)	

OBSERVED SURFACE DATA

Duration of Shut-in _____ Hours

Static / Dynamic Property	Orifice Size (Inches)	Casing one: Motor Prover Pressure (psig) (P _m)	Pressure Differential in Inches H ₂ O	Flowing Temperature (T)	Well Head Temperature (T)	Casing Wellhead Pressure (P _w) or (P ₁) or (P ₂)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P ₂)		Duration (Hours)	Liquid Produced
						psig	psia	psig	psia		
Shut-In						50		65			
Flow											

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FLOW STREAM ATTRIBUTES

Plate Coefficient (F ₁) (F ₂) (Mcd)	Casing one: Motor or Prover Pressure (psia)	Press Extension (P _w x h)	Gravity Factor (F _g)	Flowing Temperature Factor (F _t)	Deviation Factor (F _{pr})	Metered Flow (Mcd)	GOR (Cubic Feet/Barrel)	Flowing Fluid Gravity (G _g)

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

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

(P ₁) ² - (P ₂) ² or (P ₂) ² - (P ₁) ²	(P ₁) ² - (P _w) ²	Choose formula 1 or 2: 1. P ₁ ² - P ₂ ² 2. P ₂ ² - P ₁ ² Divided by: P ₁ ² - P _w ²	LOG of formula 1 or 2 and divide by: P ₁ ² - P _w ²	Backpressure Curve Slope = "n" or Assigned Standard Slope	n x LOG []	Antilog	Open Flow Deliverability Equals R x Antilog (Mcd)

Open Flow _____ Mcd @ 14.65 psia Deliverability _____ Mcd @ 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 28th day of August, 20 15.

William V. How
Witness (if any)

Baber Oil Company, LLC
Charles S. Baber, Mgr
Checked by

For Commission

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 Baber Oil Company, 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 Boggs "J" #1 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: 8/28/2015

Signature: Charles S. Baber
Title: Manager

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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.