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

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Type Test	<u>:</u>			(	See Instru	ctions on Re	verse Side	<del>)</del>				
Open Flow				Test Date	Tost Date: AF						,	
Deliverabilty					8-27 thru 8-28, 2015				API No. 15 — 15-007-00, 700-00-01			
Company HERMAN L. LOEB, LLC					Lease KELLY				_	#1	Well Number	
County Location BARBER C SW NE				Section 27		TWP 32S			W)	•	Acres Attributed	
Field MEDICINE LODGE-BOGGS				Reservoir MISSIS	r SSIPPIAN	٧		Gas Gat ONEO	hering Conn K	ection		
Completion Date 9-10-1963				Plug Bac 4530	Plug Back Total Depth 4530			Packer S NONE	et at			
Casing Si 4.500	Casing Size Weight 1.500 10.50			Internal T <b>4.</b> 052	Diameter	Set 453		Perforations 4450		то . 4468		
Tubing Si 2.375	Tubing Size Weight 4.70			Internal I 1.995	Diameter	Set 447		Perfor	rations N	То		
Type Con SINGLE		(Describe)			Type Fluid Production GAS, WATER			Pump Unit or Traveling Plunger? Yes PUMPING			/ No	
Producing		Annulus / Tubii	ng)	% C	% Carbon Dioxide				en ·	Gas Gr	Gas Gravity - G <sub>o</sub>	
Vertical D	epth(H)				Pre	ssure Taps				(Meter i	Run) (Prover) Size	
Pressure	Buildup:	Shut in 8-2	27	15 at 3	:15 PM	_ (AM) (PM)	Taken_8-	28	20	15 at 3:15 P	M(AM) (PM)	
Well on L	ine:	Started	2	0 at		_ (AM) (PM)	Taken		20	at	(AM) (PM)	
		<u></u>			OBSERV	ED SURFAC	E DATA		<del></del>	Duration of Shut-	in_24Hours	
Static / Dynamic Property	Size	(inches) Prover Pressure in		Flowing Temperature t	Temperature Temperature		Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> )		ubing ad Pressure (P <sub>t</sub> ) or (P <sub>c</sub> )	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In		psig (Pm	) Inches H <sub>2</sub> 0			108	psia	psig	psia	24	<del> </del>	
Flow	_					106			<del> </del>	24	CCT 19 2015	
ĻI	<u> </u>				FLOW ST	REAM ATTR	RIBUTES	1	L		OCT 19 2015	
Plate Coeffiecient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one:  Meter or  Prover Pressure psia  Press Extension P <sub>m</sub> x h		Fac	Gravity T Factor F		Fa	riation actor = pv	Metered Flor R (Mcfd)	I	RECENT	
		-		(ODEN EL	OND (DELT	VCDADII III	0.041.011	ATTONE				
(P <sub>c</sub> ) <sup>2</sup> =		: (P <sub>w</sub> ) <sup>2</sup>	= :	•		VERABILITY % (I	r) CALCUL P <sub>e</sub> - 14.4) +			(P <sub>a</sub> ) <sup>-</sup> (P <sub>d</sub> ) <sup>-</sup>	<sup>2</sup> = 0.207 <sup>2</sup> =	
(P <sub>c</sub> ) <sup>2</sup> - (F	2,)2 2,)2	$(P_c)^2 - (P_w)^2$ Choose formula 1 or 2: 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$		P <sub>d</sub> =%  LOG of lomula 1. or 2. and divide by:		Backpre Slo	Backpressure Curve Slope ≃ "n" or Assigned Standard Slope		oe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
						<u> </u>						
Open Flow Mcfd @ 14.65 psia			65 psia	Deliverability				Mcfd @ 14.65 psia				
		ned authority			tates that			o make th		ort and that he ha	<del></del>	
			said report is tru						CTOBER	ort and that he ha	, 20 <u>15</u>	
		Witness	(if any)			-	M	an V	ral	Company		
		For Corn	mission			-			Che	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 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 KELLY #1  gas well on the grounds that said well:  (Check one)	
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Signature: Manhath	RECEIVED
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Title: REP. HERMAN L. LOEB, LLC	Signature: Man Viah
	Title: REP. HERMAN L. LOEB, LLC

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.