KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				ı	(See Instruc	tions on Rev	erse Side	·)				
Op	en Flor	W								N			
✓ De	liverab	ilty			Test Date 9/29/15					No. 15 007-23232-0	00-00		
Company		PER	ATING CO	MPANY, LLO	<u> </u>		Lease LOGAN				6 X	Well Nu	mber
County BARBE			Locati E/2 SE	on	Section 19		TWP ,		RNG (E.	W)		Acres A	ttributed
Field STRANA	······································	N	.		Reservoi MISSIS				Gas Gat	hering Conn	ection		
Completion 1/16/08	on Date	e		<u>.</u> .	Plug Bac 5047	k Total Dep	th		Packer S NONE	Set at			
Casing S 4.500	ize		Weigh 10.50		Internal I	Diameter	Set at 5089		Perfo 463	rations 8	To 4824		
Tubing S	ize		Weigh 4.70	t	Internal I	Diameter	Set at		Perfo	rations EN	То		
Type Corr SINGLE		ı (De		-		id Production	n		Pump Ui	nit or Traveling PING	Plunger? Yes	/ No	
Producing		(Anr	nulus / Tubing])	% (Carbon Dioxì	ide		% Nitrog		Gas Gr	avity - G	à _g
Vertical E		1)				Pres	sure Taps			<u> </u>	(Meter I	Run) (Pr	over) Size
4731		•					•				,	, ,	•
Pressure	Buildu	o:	Shut in 9/2	9/15	20 at		(AM) (PM)	Taken_9/	30/15	20	at	(AM) (PM)
Well on L	ine:	į	Started		20 at		(AM) (PM) 1	Taken		20	at	(AM) (PM)
						OBSERVE	D SURFACE	DATA			Duration of Shut-	in	Hours
Static / Dynamic Property	Orific Size	ə	Circle one: Meter Prover Pressi		Flowing Temperature	Well Head Temperature t	Casin Wellhead P (P _w) or (P _t)	ressure	Wellhe	Tubing ad Pressure r (P ₁) or (P _a)	Duration (Hours)		i Produced Barrels)
Shut-In	.500		psig (Pm)	Inches H ₂ 0			psig 120	psia	psig 100	psia	24		
Flow	_			_								<u> </u>	
						FLOW STR	REAM ATTRIE	BUTES			<u>. </u>		
Plate Coeffiec (F _b) (F Mcfd	ient ,,)		Circle one: Meter or ver Pressure psia	Press Extension ✓ P _m x h	Gra Fac F	tor	Flowing Temperature Factor F ₁₁	Fa	iation ctor	Metered Flow R (Mcfd)	v GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m
			-									Ī	
					(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P.)	2 = 0.2	
(P _c) ² =		_:	$(P_{w})^{2} =$	<u> </u>	P _d =		% (P _c	- 14.4) +	14.4 =	<u> </u>	(P _a)		
(P _o) ² - (I		(F	(P _w) ² - (P _w) ²	Choose formula 1 or, 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_g$	LOG of formula 1. or 2.	P _c ² - P _w ²	Slope Assi	sure Curve e = "n" or gned rd Slope	l n x	LOG	Antilog	Deli Equals	en Flow verability R x Antilog Mcfd)
								_					
Open Flo	w			Mcfd @ 14	.65 psia		Deliverabil	ity			Mcfd @ 14.65 psi	a	
The t	undersi	gnec	authority, o	n behalf of the	Company,	states that h	-			•	rt and that he ha	s know	edge of
the facts s	tated th	ierei	n, and that sa	aid report is tru	e and correc	t. Executed	this the 1		day of C	CTOBER		, 2	15
					KANSA	Receives corrections	ved ON COMMISSION	Wi	nl		and		
			Witness (I	fany)				-		For C	Company		
			For Comm	ission		0CT-1 6	7U15 —			Chec	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 WOOLSEY OPERATING CO, 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 LOGAN 6-X 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
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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: _10/1/15
Date
Signature: Win R Hallang R. Title: FIELD MGR.

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.

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