SIP

Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test:	:			('See Instruct	tions on Re	verse Side	e)					
Ope	en Flow			Table Day				A Pol	No. 45				
Deliverabilty					Test Date: 10-14-15				No. 15 119-21377-0	0-00			
Company O'BRIEN ENERGY RESOURCES CORP.						, Lease VAIL				8-30	Well Number 8-30		
County Location MEAD E2 W2 W2 NE			Section 30	NATIONAL PROPERTY AND			RNG (E/ 29W	RNG (E/W) 29W		Acres Attributed			
Field				Reservoir MORRO				Gas Gat DCP	hering Conne	ection			
Completion Date 1-22-15			Plug Bac 6420	k Total Dept	th	Packer Set at NONE		Set at					
Casing Si			Internal Diameter 4.090		Set at 6382		Perforations 5841		то 5847				
Tubing Siz 2.375			Internal Diameter 1.995		Set at 5690		Perforations		То				
Type Com SINGLE	npletion (D	escribe)		Type Flui OIL W	d Production	າ		Pump Ur YES-F	_	Plunger? Yes	/ No	of the Material Control of the Contr	
Producing ANNULI		nulus / Tubing)		% C	arbon Dioxi	de 		% Nitrog	en	Gas Gr	avity - G _g		
Vertical Depth(H) 5844				Press FLAI	ure Taps VGE				(Meter Run) (Prover) Size 3.068"				
Pressure Buildup: Shut in 10-13-15			3-15 2	0at0	(AM) (PM)	(PM) Taken 10-14-15		20	at 0930	(AM) (PM)			
Well on Li	ine:	Started	2	0 at		(AM) (PM)	Taken	~	20	at	(AI	V) (РМ)	
					OBSERVE	D SURFACE	E DATA			Duration of Shut-	_{in_} 24.0	Flours	
Static / Orifice Dynamic Size Property (inches)		Circle one: Meter Prover Pressure psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P ₁) or (P _c) psig psia		Tubing Wellhead Pressure (P_w) or (P_l) or (P_c) psig psia		Duration (Hours)	Liquid Produced (Barrels)		
Shut-In			2			547.7	562.1			24.0	.0		
Flow													
					FLOW STR	EAM ATTR	IBUTES						
Coefficient Meler		Circle one: Meter or over Pressure psia	Eutopolog		vity T	Flowing emperature Factor F _{f1}	mperature Factor		Metered Flow R (Mcfd)	GOR (Cubic Fe Barref)	et/	Flowing Fluid Gravity G _m	
	!												
P _c) ² =		(P _w)² =	:	,	OW) (DELIV			ATIONS 14.4 =	:	· a-	² = 0.207 ² =		
		Choose formula 1 or a 1. P _c ² · P _e ² 2. P _c ² · P _d ² divided by: P _c ² · P _d		LOG of formula 1, or 2. and divide p 2 p 2		Backpressure Curve Slope = "n" or Assigned Standard Slope		0 x 10G		Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
Open Flov	Flow Mcfd @ 14.65 psia					Deliverability			Mcfd @ 14.65 psia				
The u	ındersigne	d authority, on l	pehalf of the	Company, s	states that h	e is duly au	ıthorized t	o make th	ne above repo	rt and that he ha	is knowle	dge of	
ie facts st	ated there	in, and that said			t. Executed	this the 14	 <u> </u>	day of	CTOBER		, 20	15 .	
<u> </u>	ope	40 KC Witness (if an	c W	chite	2 NU	V 22 2	115	vei E	Dan W.	Islano (ompany ked by	170	5/10	
MC-114" - 14811 - 14811 14811 14811 14811 14811 14811 14811 14811 14811 14811 14811 1481		For Commiss				~ y &(E ~en=		7/	Voul	1500 ked by			
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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 O'BRIEN ENERGY RESOURCES COP 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 VAIL 8-30 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:
Signature:

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.