## Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type rest			•		ι	gee monuc	uons on nev	erse Side	<i>'</i>			
	en Flov eliverabi		ررات ولارا	tIn Test	Test Date 10/6/20					lo. 15 75-22216-0	0-00	
Company America	y			WIII HEST	10/0/20		Lease HANDY		,	70 222 70 0		Well Number
County SEWAR	:D		Locati SE NW	ion NW NE	Section 29		TWP		RNG (E/W) 31W		Acres Attributed	
Field			<u>OL 1444</u>	7444	Reservoir CHEST				Gas Gath	ering Conne	ction	
Completion 6/12/201		€			Plug Bac 6464	k Total Dep	th		Packer Se	et at		
Casing S 5.5	lize		Weigh 15.5	Weight Internal Diameter Set at Perforations 15.5 4.950 6496 5940		то 5945						
Tubing Si	oing Size Weight			Internal E 1.995	Internal Diameter 1.995		Set at		Perforations		To	
Type Con Gas	npletion	ı (De	scribe)	_		d Production			Pump Uni	or Traveling	Plunger? Yes	/ No
Producing	•	(Ann	ulus / Tubin	g)	% C	arbon Dioxi	ide		% Nitroge	n	Gas Gr	avity - G <sub>g</sub>
Vertical D		)		<del></del>		Pres	sure Taps				(Meter I	Run) (Prover) Size
Pressure	Buildur	- o: S	Shut in 10/	6 2	0_15_at_1	0:00AM	(AM) (PM)	Taken_10	)/7	20 .	15 at 10:00A	AM (AM) (PM)
Well on L	ine:	S	started	20	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
			•			OBSERVE	D SURFACE	DATA			Duration of Shut-	in 24 Hours
Static / Dynamic Property	Orific Size (inche	•	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H <sub>2</sub> 0	Flowing Temperature t	Well Head Temperature t	Casi Wellhead F (P <sub>w</sub> ) or (P <sub>1</sub> psig	ressure	Wellhear	bing d Pressure P <sub>i</sub> ) or (P <sub>c</sub> ) psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In							110	-		·	KANSAS C	Received
Flow							30				DE	TORATION COMMISS
			<del>_</del>	i	<u> </u>	FLOW STR	REAM ATTRI	BUTES				
Plate Coefficcient (F <sub>b</sub> ) (F <sub>p</sub> ) Mofd		,	Circle one: Meter or ver Pressure psia	Press Extension √ P <sub>m</sub> x h	Extension Fact		tor Temperature		ation ctor :	Metered Flow R (Mcfd)	GQF) (Cubic Fe Barrel)	BRIM, KB . SICAL
(P <sub>c</sub> ) <sup>2</sup> =		_:	(P <sub>w</sub> ) <sup>2</sup> =	:	(OPEN FL		<b>'ERABILITY)</b> % (P.	CALCUL - 14.4) +		:	(P <sub>a</sub> ) <sup>(</sup>	<sup>2</sup> = 0.207
(P <sub>c</sub> ) <sup>2</sup> - (I or (P <sub>c</sub> ) <sup>2</sup> - (I	P <sub>a</sub> ) <sup>2</sup>	(P <sub>c</sub>	)²- (P <sub>w</sub> )²	Choose formula 1 or 2: 1. $P_o^2 - P_s^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide by:	P <sub>c</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup>	Slop Ass	sure Curve e = "n" or igned rd Slope	n x 10	og [	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
Onen Fler				New O 111	SE ania		Dalimonti					
Open Flor		anod	authority a	Mcfd @ 14.	•	tatoo that L	Deliverabi	-	n mele #-	<del>-</del>	ofd @ 14.65 psi	
				n benair of the aid report is true						above repor	t and that he ha	s knowledge of, 20 _15
are 16015 5	iaiou (II	1010111	, and that Se	ara report is true	and correc	. Executed	i uns nie <u> </u>			40110	Mas o	, 20
			Witness (I	f any)	<del></del>	-	_				MANUS	
			For Comm	ission			_		F	Check	ed by	

	er penalty of perjury under the laws of the state of Kansas that I am authorized to request ler Rule K.A.R. 82-3-304 on behalf of the operator American Warrior Inc.
and that the foregone correct to the best of equipment instant I hereby requi	toing pressure information and statements contained on this application form are true and of my knowledge and belief based upon available production summaries and lease records allation and/or upon type of completion or upon use being made of the gas well herein named. Lest a one-year exemption from open flow testing for the HANDY 5-29 bounds that said well:
(Check	
Date: <u>11/17/2015</u>	Signature: WELL OPERATIONS ASSISTANT

## 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.