KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:	:					(-	See Instruc	tions on Re	everse S	ide,)					
☐ Opt	en Flov	V Itu .		,	رمسيسر ١	Test Date	:				API N					
Company			Hr. Su rior, inc.	ut	In 16	<u> </u>	015	Lease KANS/	AS UNIX	/EF		33-20598-0	0-01	2-32	Well Nu	mber
County Location COMANCHE SW NE NW SE				Section 32	·	TWP 33S			RNG (E/W)					Mtributed		
Field COLLIER FLATS EAST				Reservoir		333		Gas Gathering		ering Conne	Connection		MCC WICK			
Completio	n Date		EAS!			Plug Back	SIPPIAN	th			ANR Packer Se	t at			Des	2-3 <u>70</u> 2
08/02/83 Casing Size Weight			5250 Internal D	Diameter	Set	Set at		Perforations			То	256.	200 S			
4.5 10.5			4.052		Yomatas	535 Set			5126			5129 To	, LEC	Eller		
2.375 4.70				1.995	524	Set at 5247		Perforations					020			
Type Com OIL & G		(De	escribe)			• •	d Productio FORMAT		TER		Pump Unit	or Traveling JNIT	Plunge	r? Yes	/ No	
Producing ANNUL		(Anr	nulus / Tubin	g)		% C	arbon Diox	ide			% Nitroge	1	•	Gas G	ravity - (à,
Vertical D)			·		Pres	sure Taps						(Meter	Run) (P	rover) Size
D	D!!!.		Shut in 10/	15		. 15 1:	:00 PM	(ABA) (DAA)		10	/16		15 .	1:30 F	M	
Pressure Well on Li	•		Started													(AM) (PM)
				_			- <u>- </u>									
Di-M- 4	0-10	_	Circle one:	Τ	Pressure	Florida		ED SURFAC	SE DATA	\ 	Tu	bing	Duratio	n ofShut	-in	Hours
Static / Dynamic Property	Dynamic Size		Meter Prover Pressure psig (Pm)		Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Wellhead	Wellhead Pressure (P_w) or (P_t) or (P_c)		Wellhead Pressure (P _w) or (P₁) or (P₀) psigpsia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In								130								
Flow								30								
				ı—			FLOW ST	REAM ATT	RIBUTES	3			 -			
Plate Coeffiecient (F _b) (F _p) Mofd		Circle one: Meter or Prover Pressure psia		Press Extension √P _m xh		Grav Fact F _c	tor	Flowing Temperature Factor F ₁₁		Deviation Factor F _{pv}		Metered Flow R (Mcfd)		GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
L						<u> </u>										
(P _c)² =		_:	(P _w)² =	1.	:	(OPEN FL	OW) (DEFI/		Y) CALC (P _c - 14.4			:) ² = 0.2) ² =	207
(P _c) ² - (F or (P _c) ² - (F		(F	P _o) ² - (P _w) ²	1. 2.	se formula 1 or 2: $P_{c}^{2} - P_{a}^{2}$ $P_{c}^{2} - P_{d}^{2}$ $d by: P_{c}^{2} - P_{w}^{2}$	LOG of formula 1. or 2. and divide	P _c ² -P _w ²	Backpr Sl-	essure Cu ope = "n" or ssigned dard Slop	ırve	n x LC	ре	Aı	ntilog	O De Equal	pen Flow liverability s R x Antilog (Mcfd)
Ones Fla	_	_				05.000										
Open Flo					Mcfd @ 14.			Delivera						14.65 ps		
			d authority, o in, and that s									above repo	rt and	tnat he h		vledge of 20 15
					*						Sh	llei	Cas	S.l	·	
			Witness	(if any)							7	DA I CO	ompany	Ind	001	
	•		For Com	nission								Chec	ked by	1404	سلمه	

	er penalty of perjury under the laws of the state of Kansas that I am authorized to request der Rule K.A.R. 82-3-304 on behalf of the operator <u>AMERICAN WARRIOR</u> , INC.							
and that the fore, correct to the bes of equipment insta I hereby requ	going pressure information and statements contained on this application form are true and tof 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. est a one-year exemption from open flow testing for the KANSAS UNIVERSITY #2-32 ounds 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							
staff as necessar	e to supply to the best of my ability any and all supporting documents deemed by Commission y to corroborate this claim for exemption from testing.							
Date: _12/16/201	<u> </u>							
	Signature: WELL OPERATIONS ASSISTANT							
	TITIE: MELL OF LIVATIONS 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.