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

Type Test	t;				(	See Instruct	tions on Rev	erse Side	<del>)</del>						
Open Flow					Test Date: API No. 15										
Deliverabilty					12-5 THRU 12-6, 2015				15-007-21285 <b>– 0000</b>						
Company HERMAN L. LOEB, LLC					Lease AURORA BAN				K 2-5				Well Number		
County Location BARBER S2 SE NW				Section 5		TWP 35S		RNG (E/W) 12W				Acres /	\ttributed		
Field HARDTNER				Reservoir MISSISSIPPIAN			Gas Gathering Connection ONEOK								
Completion Date 1-2-1982			Plug Bac 4920	Plug Back Total Depth 4920				Packer Set at							
Casing Size Weight 5.500 14.00			Internal E 5.012	Diameter	Set at 4949		Perforations 4820			то 4842					
Tubing Size W			Weight	nt	Internal I	Diameter	Set at 4850		Perforations OPEN			То			
Type Completion (Describe) SINGLE				Type Flui	Type Fluid Production GAS, OIL, WATER							/ No			
Producing	g Thru	(An	nulus / Tubin	g)		arbon Dioxi			% Nitroge			Gas G	ravity - (	3 <sub>9</sub>	
ANNUL Vertical D		H)	··			Pres	sure Taps					(Meter	Run) (P	rover) Size	
	D. 21-4		ob 12-	52	. 15 . 9:	30 AM	(ABA) (DBA) :	12	2-6		15 _	9:30 A	M	(ALA) (DAA)	
Pressure Buildup: Well on Line:							(AM) (PM) Taken							(AM) (PM) (AM) (PM)	
											- <u>-</u>	ā	2/	Hours	
Static / Orifice			Circle one: Meter	Pressure Differential	Flowing Well H		ature Wellhead Pressure		Tubing Wellhead Pressure		Duration of Shut-		Liquid Produced		
Property	(inch		Prover Press psig (Pm)	in Inches H <sub>2</sub> 0	t	1	(P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> ) psig psla		(P <sub>_</sub> ) or psig	(P <sub>t</sub> ) or (P <sub>c</sub> )	(Hours)		\	Barrels)	
Shut-In						<u> </u>	16			1	24				
Flow	L					EI OW STE	REAM ATTRI	RIITES	_	<u> </u>					
Plate	,		Circle one:	Press			Flowing							Flowing	
Coeffictient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Meter or Prover Pressure psia		Extension  P <sub>m</sub> xh	Grav Fact	tor	Temperature Factor F <sub>tt</sub>	mperature Factor		lor R		GOR (Cubic Fee Barrel)		Fluid Gravity G <sub>m</sub>	
			_				-								
(P <sub>c</sub> ) <sup>2</sup> =			/P \2 -	<u> </u>	(OPEN FLO		'ERABILITY) % (P.	CALCUL - 14.4) +					) <sup>2</sup> = 0.2	07	
(P <sub>c</sub> ) <sup>2</sup> - (P <sub>e</sub> ) <sup>2</sup>			P <sub>o</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Choose formula 1 or 2			Backpressure Curve			oe [ ]		<u>, v a</u>	Open Flow Deliverability		
or $(P_c)^2 - (P_d)^2$				2. P <sub>c</sub> <sup>2</sup> -P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> -P	2. P <sup>2</sup> -P <sup>2</sup> 1. or 2.		P <sub>c</sub> <sup>2</sup> -P <sub>w</sub> <sup>2</sup> Assig		-   " ^ -			Antilog		Equals R x Antilog (Mcfd)	
			<del></del>				ļ								
Open Flo	w	<u> </u>	1.	Mcfd @ 14	 .65 psia		Deliverabi	lity		<u> </u>	Mcfd @	14.65 ps	ia		
The	unders	signe	d authority, c	n behalf of the	Company, s	states that h	e is duly au	thorized t	o make the	above repo	ort and	that he h	as know	ledge of	
		•		aid report is tru	e and correc	t. Executed	this the 13	TH	day of DE	CEMBER				20 15 .	
			Witness	(if any)			8 304E   CH!T}	$^{\cdot}$ $A$	lan V		Соптрапу				
			For Comi	· · · · · · · · · · · · · · · · · · ·		DEC 9				Che	scked by				
			. or com			REC	EIVED			Offic	u 17				

	r the laws of the state of Kansas that I am authorized to request behalf of the operator HERMAN L. LOEB, LLC								
	and statements contained on this application form are true and								
correct to the best of my knowledge and beli	ef 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 f	rom open flow testing for the AURORA BANK #2-5								
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 produci	ng at a daily rate in excess of 250 mcf/D
								I further agree to supply to the best of n staff as necessary to corroborate this claim	ny ability any and all supporting documents deemed by Commission for exemption from testing.
								Date: 12-13-2015	
S	ignature: Alan Viett								
KCC WICHITA	Title: REP. HERMAN L. LOEB, LLC								
DEC 1 6 2015									
<del>-</del>									
RECEIVED									

## 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.