KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | t: | | | | | (| See Instruc | ctions on Re | verse Side | y | | | | | | |
|--|-------------------|-------|--|---|---|--|---|-------------------------------------|--|-----------------------------|--|---------------------|----------------------------------|----------|---|--|
| = ' | en Flo liverab | | X Shut-In | Pressure | | Test Date | | | | | No. 15 -21095-000 | 0 | | | | |
| Company Running | | s Pe | troleum, Inc | D. | | | | Lease C Heim | | | | | 13 | /ell Nu | ımber | |
| County Location Leavenworth N2 NW NW | | | | - | Section 30 | | TWP 8S | | RNG (E/W) 22E | | | Acres Attributed 40 | | | | |
| Field | | | | | | Reservoir McLouth | n/Burgess | | | | hering Conn ransmission | | | | | |
| Completic 1/12/89 | on Dat | Э | | | | lug Back | k Total Der | oth | | Packer S N/A | et at | | | | | |
| Casing Size 4-1/2" | | | Weight 9.5# | | | nternal [| Diameter | Set at 1300 | | Perforations 1186 - 1194 | | | ^{То} and 1238 - 1244 | | | |
| Tubing Size Weight 2-3/8" 4.7# | | | | t | ı | nternal [| Diameter | | Set at 1254 | | rations | | То | | | |
| Type Con Gas | npletio | n (De | escribe) | | | Type Flui Nil | d Production | on | · <u> </u> | Pump Ur Pump | nit or Traveling |) Plur | iger? Yes / | No | | |
| Producing | _ | (Anr | rulus / Tubing | 3) | -, | % C | arbon Diox | ride | | % Nitrog | en | | Gas Gra | vity - (| G _p | |
| Vertical D | | l) | | · · · · · · · · · · · · · · · · · · · | | | Pre | ssure Taps | | | | | (Meter R 2" | un) (P | rover) Size | |
| Pressure | Buildu | p: | Shut in | 1 | 20_1 | 15 at 8 | :35AM | _ (AM) (PM) | Taken 12 | 2/2 | 20 | 15 | at_9:25AN | <u> </u> | (AM) (PM) | |
| Well on L | ine: | , | Started | | 20 | at | | _ (AM) (PM) | Taken | | 20 | | at | ! | (AM) (PM) | |
| | | | | | | | OBSERV | ED SURFAC | E DATA | | | Dura | tion of Shut-in | ١١ | Hours | |
| Static / Dynamic Property | Dynamic Size | | Gircle one: Meter Praver Pressi psig (Pm) | Pressure Differentia in Inches H ₂ | at Ter | Flowing mperature t | Well Head Temperature t | Wellhead (P _w) or (F | Casing Wellhead Pressure (P _w) or (P ₁) or (P _c) | | Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c) | | Duration (Hours) | | Liquid Produced (Barrels) | |
| Shut-In | | | P-0 () | | | | | psig 10 | psia | psig | psia | 24 | + | | | |
| Flow | | | | | | | | | | | | | | | | |
| | | | <u>-</u> | 1 | | | FLOW ST | REAM ATTR | IBUTES | | | | | | 1 | |
| Plate Coefficient (F _b) (F _p) Mcfd | | Pro | Circle ane: Meter or over Pressure psia | | Press Extension P _m xh | | Gravity Factor F _g | | Temperature Fa | | elation Metered Flow actor R = Pv (Mcfd) | | w GOR (Cubic Fee Barrel) | | Flowing Fluid Gravity G _m | |
| | | | | | l (C | PEN FL | OW) (DELI | VERABILITY |) CALCUL | ATIONS | | | (P _a) ² | = 0.2 | 207 | |
| (P _c)² == | | _:_ | (P _w) ² = | Choose formula 1 c | 2. | P _d = | | <u>% (I</u> | o _c - 14.4) + | 14.4 = | :_ | | (P _d) ² | = | | |
| $(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$ | | (F | P _o) ² - (P _w) ² | 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - 1$ | | LOG of formula 1. or 2. and divide by: | P _c ² - P _w ² | Slo As | Backpressure Curve Slope = "n" or Assigned Standard Slope | | n x LOG | | Antilog | | Open Flow Deliverability Equals R x Antilog (Mcfd) | |
| | | | | | | | | | | | | | | | | |
| Open Flo | NA/ | | | Mcfd @ 1 | 14 65 | neia | | Deliverat | | | | Mofd | @ 14.65 psia | | | |
| | | iano | d authority o | | | - | etatoe that | | - | n maka ti | no above ren | | <u> </u> | | vlodge of | |
| | | _ | • | aid report is t | | | | • | | | ecember | JIL AII | d that he has | | 20 <u>15</u> . | |
| | | | 1200 | St and | _ | K | CC W | CHITA | -570 | e (| | Comercia | | | | |
| | | | Witness (| | | [| DEC 17 | 2015 | 1 | 0 | | Compa | | | | |
| | | | . 5. 00/11 | | | | RECE | EIVED | | | 5110 | | • | | | |

| | er penalty of perjury under the laws of the state of Kansas that I am authorized to request |
|--------------------|--|
| exempt status und | ler Rule K.A.R. 82-3-304 on behalf of the operator_Running Foxes Petroleum, Inc. |
| and that the foreg | poing pressure information and statements contained on this application form are true and |
| correct to the bes | t of my knowledge and belief based upon available production summaries and lease records |
| of equipment insta | allation and/or upon type of completion or upon use being made of the gas well herein named. |
| I hereby requ | est a one-year exemption from open flow testing for the C Heim 13 |
| gas well on the gr | ounds that said well: |
| | |
| (Check | |
| <u> </u> | 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 |
| V | is not capable of producing at a daily rate in excess of 250 mcf/D |
| I further agree | e to supply to the best of my ability any and all supporting documents deemed by Commission |
| staff as necessar | y to corroborate this claim for exemption from testing. |
| | |
| Date: 12/11/2015 | |
| pale. 12.112 | |
| | |
| | |
| | |
| | KCC WICH!TA Signature: |
| | DEC 1 7 2015 Title: Geologist |
| | Title |
| | 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.