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

Type Test:	i			(8	See Instructi	ions on Reve	rse Side)	)				
✓ Ope	en Flow			Test Date				ADI	No. 15			
Del	iverabilty	ı		11/11/20					No. 15 )95-00861-0	000		
Company Atlas Ope		LLC				Lease JAMES G	. schu	IMAN		1	Well Nur	nber
County Location Kingman NW NW SW		Section 20				RNG (E/W) 7W		Acres Attributed		ttributed		
Field Spivey-Grabs-Basil			Reservoir MISSISS			Gas Gathering Cont ONEOK		_	tion *CC.		<u>ک</u> ر .	
Completion Date 02/18/1956			Plug Back Total Depth 4289			Packer Set at 4261				To 4340 RECEIVED		
Casing Size Weight 5 1/2		Internal Diameter		Set at 4389		Perforations 4272		то 4340	RE	000		
Tubing Size Weight 2 3/8		Internal Diameter		Set at <b>4325</b>		Perforations		То		EIVEC		
	npletion (	(Describe)		Type Flui	d Production			Pump Un	it or Traveling Unit	Plunger? Yes	/ No	
Producing Thru (Annulus / Tubing) Annulus			<u>a)</u>	% c	de	% Nitrogen 6,9432			Gas Gravity - G <sub>g</sub>			
Vertical D				10211		sure Taps	<u>.</u>	0.5452		(Meter	·	over) Size
4390 Pressure	Buildun	Shut in 11/	11 2	15 <sub>at</sub> 1	Pipe 1:00 AM	(AM) (PM) T	aken 11	/12	20	4 15 <sub>at</sub> 11:00	AM ,	AM) (PM)
Well on L	•									at		
					OBSERVE	D SURFACE	DATA		<del></del>	Duration of Shut	-in 24	Hour
Static / Dynamic Property	Orifice Size (Inches	Meter Prover Pressu	Pressure Differential in	Flowing Temperature t	Well Head Casing Tubing Wellhead Pressure Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> ) Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Duration (Hours)	Duration Liquid Produced				
Shut-In	(monoc	/ psig (Pm)	Inches H <sub>2</sub> 0		`	psig 110	psia	psig 70	psla			
Flow									1			
_					FLOW STR	EAM ATTRIE	BUTES					-
Plate Coeffied (F <sub>b</sub> ) (F Mote	lent <sub>P</sub> )	Circle one: Meter or Prover Pressure psia	Press Extension P <sub>m</sub> xh	Grav Fac F	tor	Flowing Temperature Factor F <sub>rt</sub>	Fa	iation ctor :	Metered Flov R (Mcfd)	v GOR (Cubic F Barrel	eet/	Flowing Fluid Gravity G <sub>m</sub>
												<u></u>
P <sub>c</sub> ) <sup>2</sup> =		: (P <sub>w</sub> ) <sup>2</sup> =	:	(OPEN FL		'ERABILITY) % (P_	CALCUL - 14.4) +		:		) <sup>2</sup> = 0.2 ) <sup>2</sup> =	07
(P <sub>c</sub> ) <sup>2</sup> - (l or (P <sub>c</sub> ) <sup>2</sup> - (l	•	(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Chocse formula 1 or 2  1. P <sub>c</sub> <sup>2</sup> - P <sub>s</sub> <sup>2</sup> 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 <sub>w</sub>	LOG of formula 1. or 2. and divide		Backpress Slope 	sure Curve = "n" or gned rd Slope	n x	LOG [	Antilog	Op Del Equals	pen Flow iverability R x Antilog (Mcfd)
			- c <u>w</u>									
					<del>-</del>						<u> </u>	<del></del>
Open Flo	w		Mcfd @ 14.	.65 psia		Deliverabil	ity	<del></del>		Mcfd @ 14.65 ps	sia	
		ned authority, o erein, and that s				-			ne above repo	ort and that he h		ledge of <sub>20</sub> <u>15</u>
i v		Witness (	if anyl						Earl	Company		
					<del></del>	_						
-		For Comm	nission	_		_			Che	cked by		

*	perjury under the laws of the state of Kansas that I am authorized to request R. 82-3-304 on behalf of the operator Atlas Operating, LLC
correct to the best of my know	re information and statements contained on this application form are true and edge and belief based upon available production summaries and lease records rupon type of completion or upon use being made of the gas well herein named.
	ar exemption from open flow testing for theJAMES G. SCHUMAN #1
is cycled of is a source is a source is on vacual is not capa	aid well:  AND OB 20  AND OB 20
staff as necessary to corrobo  Date: 12/29/2015	ate this claim for exemption from testing.
	Signature:  Title: ENGINEER

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.