KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	;					6	See Instruc	tions on R	eve	rse Side)	•					
Ор	en Flow	,				Test Date	ν.				ΛDI	No. 15				
✓ Del	liverabil	ty					13, 2015					033-21584-0	00-00			
Company Castelli		ora	tion, Inc.					Lease Greg g	<u> </u>					2-29	Well Nu	mber
County Coman	che		Locati N2 NW		E NW	Section 29		TWP 33S			RNG (E	W)			Acres A	attributed
Field Ham						Reservoir Mississ				·	Gas Gat Oneol	hering Conne	ection			
Completic 06-22-20						Plug Baci 5117	k Total Dep	th			Packer S	Set at				
Casing Si 5 1/2"	ize	-	Weigh 15.5	nţ		Internal E	Diameter	Set 510				rations 2-06		To 5014-	18	
Tubing Si 2 7/8"	ze		Weigh	nt		Internal D	Diameter	Set 49;				rations 3-27	-	То		
Type Con Single Z			scribe) Perforati	ons	3	Type Flui	d Productio	n				nit or Traveling ing Unit	Plunge	r? Yes	/ No	
Producing Annulus		(Anr	ulus / Tubin	g)	· · · · · ·	% C	arbon Diox	ide			% Nitrog			Gas Gr	avity - (ig g
Vertical D)					Pres	ssure Taps						(Meter I	Run) (P	rover) Size
Pressure	Buildup);	Shut in Jar	nua	ıry 13 2	0 15 at 8	:00	(AM) (PM) T	aken_Ja	nuary 1	14 20	15 at	8:00	((AM) (PM)
Well on L	ine:	;	Started		2	0 at		. (AM) (PM) T	aken		20	at	· 	(AM) (PM)
						1	OBSERVE	ED SURFA	CE	DATA			Duratio	n of Shut-	in	Hours
Static / Dynamic	Orific Size		Circle one: Meter Prover Press	иге	Pressure Differential in		Well Head Temperature	Wallhaa		ressure	Wellhe	Tubing ad Pressure r (P,) or (P _c)		ration lours)		d Produced Barrels)
Property Shut-In	(inche	8)	psig (Pm)		Inches H ₂ 0	t	1	psig 630	Ť	psia 644.4	psig	psia				
Flaw									+						1	
·'			l • •			1	FLOW ST	REAM ATT	RIE	BUTES		,			· -	
Plate Coeffied (F _b) (F Mcfd	ient		Circle one: Meter or ver Pressure psia		Press Extension	Grav Fact	tor	Flowing Temperature Factor F ₁₁	•	1	ation otor	Metered Flov R (Mcfd)	v	GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
		-		Γ							,					
/D \2 _			/D)2 -			•	OW) (DELI		•					-	² = 0.2	07
(P _c) ² =					ose formula 1 or 2	P _d =				- 14.4) + sure Curve	14.4 = _	 `_		(P _d)	1	
(P _c) ² - (I or (P _c) ² - (I		(F	(P _w) ² - (P _w) ²	:	1. P _e ²-P _a ² 2. P _e ²-P _a ² led by: P _e ²-P _w	LOG of formula 1. or 2. and divide by:	P _c ² · P _w ²		lope c Assig	e "n" or gned d Slope	n x	LOG	A	ntilog	Del Equal:	oen Flow iverability s R x Antilog (Mcfd)
						-										
Open Flo	w				Mcfd @ 14.	.65 psia		Delivera	abili	ity			Mcfd @	7 14.65 ps	ia	
			•					•				he above repo	ort and	that he ha		
the facts s	tated th	erei	n, and that s	aid	report is tru						day of	anuary /	 		1	20 16
			Witness	(if an	у)	• .	CC W				u ()) (ui	Company			
			For Com	missio	on		LLD (i mir	_			Che	cked by			
							rest.	.	Ź	2-1	-16					

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Castelli Exploration, Inc. and that the foregoing pressure information and statements contained on this application form are true and correct to the best of my knowledge and belief 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 from open flow testing for the Gregg #2-29 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 producing at a daily rate in excess of 250 mcf/D
I further agree to supply to the best of my ability any and all supporting documents deemed by Commission staff as necessary to corroborate this claim for exemption from testing.
Date: January 21, 2016
KCC VIICHITA Signature: The Care
FEB 0 1 2016
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.