Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	:		•		(See Instruct	tions on Rev	rerse Side	?)					
= '	en Flo liverab				Test Date 10/5/1	5			∂97	-2 ¹⁵ 200	000 1 0 0	0 <i>0</i>		
Comnand		C); & G	as Ope	eratio	ns	CLAR	KD				2	Well Nu	mber
RIOWA SESW SE			Section 16	Section 16		27s		PNG (E/W)			Acres Attributed			
FRUIT	NE	ΕX	(T		Missi	KINDE	RHOOK		ÖNEC	ering Conn	ection			
Completion Date 12/18/2003					Plug Bac 4722	Plug Back Total Depth 4722				Packer Set at N/A				
Casing Size Weight 8 5/8 23				Internal 0 4,950	Internal Diameter Set at 4,950 418			Perfor 4626	To 4552-56					
Tubing Size Weight 4 1/2 10.5				Internal I 1.995	Internal Diameter Set at 1.995 4767			Perfor	То					
Type Completion (Describe)					Type Flui WATE	Type Fluid Production WATER			Pump Unit or Traveling Plunger? Yes / No					
Producing	Thru	(Anı	nulus / Tubin	g)	% C	Carbon Dioxi	de		% Nitroge	ា		Gas G	ravity - 0	àg
Vertical D	epth(H	l)			J. C. J. 1811 P. L. 1	Pres	sure Taps					(Meter 2.067		rover) Size
Pressure	Buildu	p:	10/ Shut in	5	15 1 20 <u>at</u>	0AM	(AM) (PM)	1(Taken	0/6	20	15 at_	10AM	(AM) (PM)
				at (AM) (PM) Tal										
						OBSERVE	D SURFACE	DATA			Duration	of Shut	24 -in	Hour
Static / Dynamic Property	mic Size		Circle one: Meter Prover Press psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	ture (P_w) or (P_t) or (P_c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In	hut-In		poig (i iii)	11131130 112		170		psia	psig _	psia	24	24		_
Flow													İ	
	i			T		FLOW STR	REAM ATTR	BUTES						
Plate Coeffied (F _b) (F Mcfd	ient _P)	Circle one: Meter or Prover Pressure psia		Press Extension P _m xh	Grav Fac F	tor	Temperature		riation actor = pv	Metered Flov R (Mcfd)	v	GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
		_			(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS					
(P _c) ² =		_:	(P _w) ² =		P _d =		•	_c - 14.4) +		:) ² = 0.2) ² =	
(P _c)² - (I or (P _c)² - (I	P _a) ² (I		P _c)²- (P _w)²	Choose formula 1 or. 1. P _c ² - P _c ² 2. P _c ² - P _c ² divided by: P _c ² - P _c	LOG of formula 1, or 2. and divide	P _c ² -P _w ²	Backpressure Curve Slope = "n" or Assigned Standard Slope		n x LOG		Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)	
		_												
Open Flo	w			Mcfd @ 14	.65 psia		Deliverab	ility	ļ		Mcfd @	14.65 ps	ia ia	<u> </u>
		_	-	n behalf of the			3	thorized t		e above repo AN	ort and th	nat he h	as know	ledge of 20
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			Witness	if any)	FEI	B 0 4 20	116		<i></i>	For	Company		- <u> </u>	. U W
			For Com	nission	R	ECEIVE	ED -			Che	cked by			

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 Prater Oil & Gas Operations 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
gas well on the grounds that said well:
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: JAN 31, 2016
KCC WICHITA Signature: Long Sardule Title: TRUSTEE/MANAGER 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.