KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

Type Test	t:				•	See instruc	tions on He	verse Side	9)					
√ Op	en Flo	w			Test Date	a·			API	No. 15				
De	liverab	ilty			12/22/1					033-21443-0	00-00			
Company Sandridg		ol &	Prod LLC				Lease Jellison				2-4	Well Nu	ımber	
County Location Comanche SW SW SE				Section 4			TWP RNG (E/V 33S 19W		₩)		Acres A	Attributed		
Field Bird South				Reservoir Pawnee & Miss				Gas Gathering Connection OneOK			KC	C		
Completion Date 11/03/2005				Plug Back Total Depth 5305				Packer Set at None			FER	S. S		
Casing Size Weight 5 1/2 14#			it	Internal I 5.012		Set at Perfo 5416 502		rations 2	то 5260	RE	CEIVED			
Tubing Size 2 3/8			Weigh 4.7#	Weight 4.7#		Internal Diameter 1.995		Set at 5265		Perforations			TEIVED	
Type Con Commin					Type Flui Gas	d Productio	n		Pump Ur Yes	nit or Traveling	Plunger? Yes	/ No		
Producing Tubing	Thru	(Anr	nulus / Tubin	g)	% C	Carbon Diox	ide		% Nitrog	jeń	Gas G	ravity - (G,	
Vertical D	epth(H	1)				Pres	ssure Taps				(Meter	Run) (P	Prover) Size	
Pressure	Buildu	p: ·	Shut in 12/	21	20_15_at_1	PM	. (AM) (PM)	Taken_12	2/22	20	15 at 1PM		(AM) (PM)	
Well on L	ine:		Started		20 at		(AM) (PM)	Taken		20	at		(AM) (PM)	
						OBSERVE	D SURFACE	DATA			Duration of Shu	_{t-in} _24	Hours	
Static / Dynamic Property	Orifi Siza (inchi	Ð	Gircle one: Meter Prover Pressi psig (Pm)	over Pressure in Temperatu		Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In			Po.8 ()	monos rigo			170	psia	psig 50	psia	24	1		
Flow			_											
				1		FLOW ST	REAM ATTRI	BUTES						
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F ₁₁		iation ctor : pv	Metered Flov R (Mcfd)	v GOR (Cubic F Barre	eet/	Flowing Fluid Gravity G _m	
(P _c) ² =		:	(P _w) ² =	: :	-		/ERABILITY) % (P	CALCUL 2 - 14.4) +		:) ² = 0.2	207	
(P _c) ² - (I or (P _c) ² - (I	P _a) ²		P _c) ² - (P _w) ²	Choose formula 1 or 1. P _c ² - P _d ² 2. P _c ² - P _d ² divided by: P _c ² - P	LOG of formula 1. or 2. and divide		Backpres Stop Ass	ssure Curve ne = "n" or signed ard Slope		ГЪ	Antilog	O _l Del Equals	pen Flow liverability s R x Antilog (Mcfd)	
				<u> </u>					_			+		
Open Flo	l w			Mcfd @ 14	4.65 psia		Deliverab	ility		_	Mcfd @ 14.65 p:	 sia	_	
-		aner	f authority o			etatos that I			n make #		ort and that he h		utedne of	
		•	•	aid report is tr	•					ebruary	int and that he h		20 <u>16</u> .	
			Witness (if any)			_	ty	H	For	Сотралу			
			For Comm	nission			-			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 Sandridge Expl & Prod LLC 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 Jellison 2-4 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: 2/1/16
Signature: Title: Production 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.