KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:			(See Instruct	ions on Re	verse Side	e)					
Op	en Flow			Test Date				۸DI	No. 15				
De	eliverabilty	<i>'</i>			_" . er 21, 201	5	•		5-19,078 ()	000			
Company Trans Pa		Corp.			-	Lease Honska			••,		Well N		
County Location Marion NE/4 SE/4			Section 8		TWP 19S		RNG (E/W) 5E			Acres Attributed			
Field Lost Spr	ings			Reservoir Mississi					thering Conne nar Oíl & Gas				
Completion Date				Plug Back Total De 2290'			Packer Set at None		Set at				
Casing Size 4-1/2"		Weight 9.5#		Internal Diameter 4.052"		Set at 2335'		Perforations		To 2222'		2242'	
Tubing Size 2-3/8"		Weight 4.7			Internal Diameter 1.995"		Set at 2230'		rations	То	То		
Type Completion (Describe) Single				Type Fluid Production Salt Water			Pump Unit or Traveling Plunger? Pumping Unit			? Yes / No			
Producing	g Thru (A	nnulus / Tubir	ıg)	% C	arbon Dioxi	de		% Nitrog	jen	Gas G	aravity -	G	
Annulus	·												
Vertical D	Depth(H)				Press Pipe	sure Taps				(Mete		Prover) Size	
Pressure	Buildup:	Shut in Oc	et 20	15 at 7	MA 00:	(AM) (PM)	Taken_O	ct 21	20	15 at 7:00	AM_	(AM) (PM)	
Well on L	ine:	Started	2	0 at		(AM) (PM)	Taken		20	at		(AM) (PM)	
					OBSERVE	D SURFAC	E DATA			Duration of Shu	_{it-in} _24	Hours	
Static / Dynamic	Orifice Size	Prover Press	Pressure Differential in	Flowing Temperature t	Well Head Temperature t	ature Wellhead Pressure		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)		
Property Shut-In	(inches)	psig (Pm)	Inches H ₂ 0			psig 35.0	psia 49.4	psig N/A	psia N/A	24	-		
Flow		 											
					FLOW STR	EAM ATTR	IBUTES						
Plate Coeffied (F _b) (F Mofd	cient /	Circle one: Meter or Prover Pressure psìa	Press Extension ✓ P _m x h	Grav Fac F _c	tor	Flowing Femperature Factor	properature Factor R (Cubic Feet/ Factor F (Mrfd) Barrel)		Flowing Fluid Gravity G _m				
(P_) ² =	;	: (P) ² :	= :	(OPEN FLO	OW) (DELIV) CALCUL ^೨ 。 - 14.4) +		:		$a_{a}^{2} = 0.5$ $a_{d}^{2} = 0.5$	207	
(P _c) ² - (l	P _a) ²	(P _c) ² - (P _w) ²	Choose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide	P _c ² -P _w ²	Backpre Slo	essure Curve pe = "n" - or signed lard Slope	, n x	roe	Antilog	De	open Flow eliverability is R x Antilog (Mctd)	
					<u></u>								
Open Flo	w		Mcfd @ 14.	.65 psia		Deliveral	oility			Mcfd @ 14.65 p	sia		
The	undersigr	ned authority,	on behalf of the	Company, s	states that h	e is duly a				rt and that he l	nas knov	wledge of	
the facts s	tated the	rein, and that s	aid report is tru	e and correc	t. Executed	this the 1	2th	day of _	lovember		1	20 15.	
=					Receive	ed -		San	ce Free	hoell-	\geq		
		Witness	(if any)	KANSAS	CORPORATIO	N COMMISSIO	N		For C	ompany			
		For Com	mission		EC 14	2015			Chec	ked 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 Trans Pacific Oil Corp 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 Honska #1 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 Commissio staff as necessary to corroborate this claim for exemption from testing.
Date: November 12,2015
Signature: Samufactors Manager
Received KANSAS CORPORATION COMMISSION Title: Operations Manager* DEC 1 4 2015 CONSERVATION DIVISION WICHITAL KS

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.