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

Type Test	:					(-	See Insti	ructi	ons on Hev	rerse Sia	e)						
Op	en Flow	٧				Test Date						APIN	lo. 15				
Del	liverabil	lty				2/13/17	•						95-22197-0	0001			
Company Dixon Op		ıg C	o., LLC			_			Lease Marker						1	Vell Nu	mber
County Location Kingman NW SE NE SW			Section 16			TWP 30S			RNG (E/W) 1 <b>Q</b> w			Acres Attributed KCC_WICHI					
ield						Reservoir Indian C						is Gath	ering Cann	ection			1-7-2017
ompletic /29/14	n Date	) 				Plug Back 4870	k Total D	epti	h 		Pa	cker Se	otat				CEIVED
Casing Size Weight 5.5 15.5				Internal Diameter 4.950			Set at 4871			Perforations 2323			то <b>2327</b>				
Tubing Size 2 3/8"		Weigh 4.7	Weight 4.7		Internal Diameter 1.995			Set at <b>2691</b>			Perforations			То			
Type Completion (Describe)				Type Fluid Production Gas, Water			ı			Pump Unit or Traveling Plunge			ger? Yes	er? Yes / No			
roducing nnulus			ulus / Tubin Dina	g)		% C	arbon Di	ioxic	de	,	%	Nitroge	n		Gas Gra	avity - (	G,
ertical D			<u>-</u>				P	ress	sure Taps						(Meter F	Run) (P	rover) Size
ressure	- Buildup	o: :	2/1	3	2	0_17_at_9	:00 am		(AM) (PM)	Taken_2	/14		20	17	9:00an	n .	(AM) (PM)
Vell on Li	•		Started														(AM) (PM)
							OBSER	IVE	D SURFACE	DATA				Dura	tion of Shut-	in	Hours
Static / Orific ynamic Size roperty (inche		Meter Prover Pressi		ure	Pressure Differential in	Flowing Temperature t	Temperature Temperatui		(P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )			Tubing Wellhoad Pressure $(P_w)$ or $(P_t)$ or $(P_c)$		Duration (Hours)		Liquid Produced (Barre!s)	
Shut-In			psig (Pm)	+	Inches H <sub>2</sub> 0			_	psig 550#	psia		psig	psia	24			
Flow																	
							FLOW S	STR	EAM ATTR	BUTES	_						
Plate Coefficcient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or Prover Pressure psia			Press Extension ✓ P <sub>m</sub> x h	Grav Fac F <sub>s</sub>	tor	Flowing Temperature Factor F <sub>rt</sub>		Deviation Factor F <sub>pv</sub>			Metered Flow R (Mcfd)		GOR (Cubic Fee Barrel)		Flowing Fluid Gravity G <sub>m</sub>
			· · · · · ·			(											
c) <sup>2</sup> =		_:	(P <sub>w</sub> )² =		:	OPEN FL			ERABILITY) 6 (P	او - 14.4) او - 14.4)			:		(P <sub>a</sub> )	2 = 0.2 2 =	207
(P <sub>c</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup> or (P <sub>c</sub> ) <sup>2</sup> - (P <sub>d</sub> ) <sup>2</sup>		(P <sub>c</sub> )²- (P <sub>w</sub> )²		1	ose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ ed by: $P_c^2 - P_d^2$	LOG of formula 1. or 2. and divide by:		2	Backpressure Cun Slope = "n" or Assigned Standard Slope		n x LOG			Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)	
		•					-										
														_			
pen Flo	<u>w</u>				Mcfd @ 14.	65 psia			Deliverab	ility				Mcfd	@ 14.65 psi	ia	
		_	d authority, o						•				above repo	ort and	d that he ha	ıs knov	viedge of 20 17 .
					2				-				Ope	-حاء	ting C	~~. ~~.	LLC
			Witness	(if any	7				-	<del></del>		•	For	Compan	, ,		
			For Com	missio	en .			_	-			<u> </u>	Che	cked by			

I declare under penalty of perjury under the law exempt status under Rule K.A.R. 82-3-304 on behalf	ws of the state of Kansas that I am authorized to request of the operator_Dixon Operating Co., LLC
	atements contained on this application form are true and
• • •	d upon available production summaries and lease records
of equipment installation and/or upon type of comple	tion or upon use being made of the gas well herein named.
I hereby request a one-year exemption from ope	en flow testing for the Marker #1
gas well on the grounds that said well:	KCC WIC
(Check one)	FEB 17 20
is a coalbed methane producer	RECEIVE
is cycled on plunger lift due to wa	ater
is a source of natural gas for inje	ction into an oil reservoir undergoing ER
is on vacuum at the present time;	; KCC approval Docket No
is not capable of producing at a o	daily rate in excess of 250 mcf/D
I further agree to supply to the best of my ability	y any and all supporting documents deemed by Commissi
staff as necessary to corroborate this claim for exer	mption from testing.
Date: 2/15/17	r The state of the
	,
Signature	
Title	P: VP of Operations

## 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.