Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test:		ONE		(See Instruc		verse Side	e)	;			٠.	
	n Flow			Test Date					No. 15			•	
Deliv	verability	AllrShu	t In Tes	11/05/1	3			15-	033-21058-0				
Company		RIOR, INC.	1		3	Lease R. BLO	UNT			1	Well Num	ber	
County Location Section COMANCHE C SE NE SE 34								RNG (E/ 18W	RNG (E/W) 18W		Acres Attributed		
Field Reservoir BUTTERMILK MARMATON						Gas Gatherin WPS			hering Conne	ection			
				Plug Bac 5244	Plug Back Total Depth 5244				Packer Set at				
Casing Size Weight 4.5 10.5			Internal [4.052	Diameter		Set at 5305		rations 6	то 5099				
Tubing Size Weight 2.375 4.70			Internal [1.995	Diameter		5150		rations	То				
Type Completion (Describe) GAS					d Production ATION W		ATER PUMF		Init or Traveling Plunger? Ye P UNIT				
Producing ANNULU	•	nulus / Tubin	g)	% C	% Carbon Dioxide			% Nitrogen			Gas Gravity - G _g		
Vertical Depth(H)				Pressure Taps			-	. 10,000	(Meter I	(Meter Run) (Prover) Size			
Pressure B	Juildup:	Shut in11/	05/ 2	0_13_at_1	0:00 AM	(AM) (PM)	Taken 1	1/06	20	13 at 11:30	<u>AM</u> (A	M) (PM)	
Well on Lin	ie: .	Started	2	0 at		(AM) (PM)	Taken		. 20	at	(A	M) (PM)	
·	· ·	Circle one:	Pressure	<u> </u>	OBSERVE	D SURFAC		Т ,		Duration of Shut-	in 24	t Hours	
Static / Dynamic Property	Orifice Size (inches)	Meter Prover Pressu	Differential in	Flowing Well Head Temperature		Casing Wellhead Pressure (P_w) or (P_1) or (P_0)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration Liquid Produce (Hours) (Barrels)			
Shut-In		psig (Pm)	Inches H ₂ 0			psig 450	psia	psig	psia				
Flow				,		50	······································						
					FLOW STR	EAM ATTR	IBUTES						
Plate Coeffiecie (F _b) (F _p) Mcfd		Circle one: Meter or over Pressure psia	Press Extension √ P _m x h	Grav Fact	IQI	Flowing Femperature Factor F ₁₁	Fa	riation actor = pv	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m	
							<u> </u>						
P _c) ² =	:	(P _w) ² =	:	(OPEN FLO	OW) (DELIV		') CALCUL '' _c - 14.4) +			(P _a) ² (P _d) ²	e 0.207	7	
(P _c) ² - (P _a or (P _c) ² - (P _d)² (F	P _e) 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: $P_c^2 - P_w^2$	P _c ² - P _a ² LOG of formula P _c ² - P _d ² and divide P ²		Backpressure Curve Slope = "n" or Assigned Standard Slope		n v I	LOG [Antilog	Delive Equals F	r Flow erability 1 x Antilog cfd)	
non Fi		,	NACES OF STREET	05 mc'-		D-15							
Open Flow			Mcfd @ 14.			Deliverab	<u> </u>		············	Mcfd @ 14.65 psi			
٠.		,	n behalf of the aid report is true						ie above repor OVEMBER	t and that he ha	•	dge of	
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· · · · · · ·		Witness (i	fany)	-				Oh.	Ford	ompany 10.	K	CC W	
		. For Comm	ission		Hunt	-		- W	Check	t dell		IOV 27	
•									•		- 81		
		. *							•			RECE	

I declare under penalty of perjury under the law	s of the state of Kansas t	hat I am authoriz	ed to request
exempt status under Rule K.A.R. 82-3-304 on behalf o			•
and that the foregoing pressure information and sta	·		
correct to the best of my knowledge and belief based	•		
of equipment installation and/or upon type of completi	,	-	erein named.
I hereby request a one-year exemption from oper	flow testing for the		
as well on the grounds that said well:			
(0)			
(Check one)			
is a coalbed methane producer			
is cycled on plunger lift due to wa	•		
is a source of natural gas for injec			
is on vacuum at the present time; I			
is not capable of producing at a d	aily rate in excess of 250	mcf/D	
I further agree to supply to the best of my ability	any and all supporting do	cuments deemed	by Commission
taff as necessary to corroborate this claim for exem	ption from testing.		
oate: 11/08/2013			*
		•	
		•	•
	O.	α	
Signature:	X Liller Al	ase	
	January		
	PRODUCTION ASSIST	ANT	
Title:			
Title:			

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.

KCC WICHITA

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