Form G-2 (Rirv, 7/03)

## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:				(•	Dou manuci	יאפור זוט פווטון		,					
Open Fit				Tost Date	0	•		API	No. 15	,	•		
Deliveral	bilty			9-29	1-10	,		. 15	-035-	24322			
Company	,					Lease				,	Well Nu		
B-C 57	EEL	LLC	<b>7</b>			DAUI	<u>s ·                                    </u>				# 2	41.4700010	
				Section	,	TWP		RNG (E/		•	ACTOS A	ttributed	
CoulEy Fleid		1 E2 - W	<u> </u>	Reservoir		32_			nering Conne	ection			
5cH∞/			074	Cleve	land!	Sand		das dan	1147	LAS			
Completion Da		CAR NO	<u> </u>	Plug Bac	k Total Depi	in	والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج	Packer S	NAT		-		
Dec 0	292							41h./ <del>************************************</del>					
Casing Size Weight				Internal E		Set at		Perforations		То	То		
4.59.5Tubing SizeWeight			4.0	7 <i>0</i> Diameter	2500 Sot at		Perforations		To				
Tubing Size		Weigh		Internal C	Diameler	Sot a	! !	Peno	rations 244	fa 10 24	62		
フ <sup>3</sup> 名 Type Completion	on (Des	cribe)		Type Flut	d Production	<u> </u>	72-	Pump Ur	olt or Traveling	Plunger? Yes	/ No		
						 =∧			Pumore	in GILT	_		
Producing Three	<i>m</i> / — u (Annu	lus / Tubing	)	O エピナ W 升T E 八 % Carbon Dioxide			1.	% Nitrog	en	Gas Gr	To 2462— unger? Yes / No 2 4,127 Gas Gravity - G <sub>g</sub>		
ANNU	145												
A V L L Vertical Depth	H)				Pres	sure Taps			•			rover) Size	
2,500	<u> </u>									METER	RUN	<u> 2"</u>	
Pressure Build	umi: Sh	nut in 9	-28_2	0/0 at /	2:15	(AM) (PM)	Taken 5	-29	20	10 at 12:1	5	(AM) (ED)	
										10 at 4: 1			
Woll on Line:	St	arted	2	0 <u>///</u> at _/	<u> </u>	(AM) (PM)	laken	<u> </u>	20	772 81		(WW) (#EMD)	
ATAN				•	OBSERVE	D SURFACE	DATA			Duration of Shut-	2تـ ما.	6 Hour	
0.11		Circle one:	Pressure		Ι	Casi		1	[ubing	Baration of Grid	<u>"'</u>	,,,,,,,,,,	
Static / Orlifeo Dynamic Size Property (Inches)		Motor	Differential	Flowing Temperature	Well Head Temperature			Wellhead Pressure (P <sub>n</sub> ) or (P <sub>r</sub> ) or (P <sub>c</sub> )		Duration		Liquid Produced	
		<i>rover Pressu</i> paig (Pm)	rø in Inches H <sub>a</sub> O	1	1					(Hours)		Burrols)	
Shut-In						1	bain	h:uA	, paid	5.7	<del>                                     </del>		
	·					160				26	+-		
Flow 2						5				4			
					FLOW STR	REAM ATTRI	BUTES			,			
Plato			Press	Gravity		Flowing Do		vistion Motered Floy		w GOR		Flowing	
Coeffiecient	1	leter ör er Prassura	Extension	Fac	tor	Temper3ture Factor		ctor	R	(Cubic Fo		Fluid Gravity	
(F <sub>ii</sub> ) (F <sub>i</sub> ) Motd	1	psia	√ P <sub>m</sub> xh	F,	;	F.,	F	F <sub>p</sub>		(Mcfd) Barrel		G <sub>m</sub>	
	1								20				
				_									
				(OPEN FL	OW) (DELIV	ERABILITY)					<sup>2</sup> = 0.2	207	
(P <sub>c</sub> ) <sup>2</sup> =	<del>_ ;</del>	(P <sub>w</sub> ) <sup>2</sup> =	<u>:</u>	P. =	<u></u>	% (P	<sub>-</sub> - 14.4) +	14.4 =	and an and administration files.	(P <sub>d</sub> )	<del></del>		
(P <sub>c</sub> ) <sup>p</sup> - (P <sub>a</sub> ) <sup>q</sup>	(P.)	٠ (P_)؛	Thoose formula 1 or 2: 1. $P_n^2 - P_n^2$	LOG of	$\Gamma$		suro Curve o = ⁻n"	ĺ	[ ]			oen Flow	
or (P <sub>c</sub> ) <sup>2</sup> - (P <sub>d</sub> ) <sup>2</sup>	""	\` \\'	2. P. P.	formula 1, or 2.			or	ηxι	.oa	ΛηιίΙος		livorsbility 3 R x Antilog	
(P <sub>c</sub> ) <sup>2</sup> - (P <sub>d</sub> ) <sup>3</sup>			ividad by. P. 2 - P. 3	and divide	P., . b.s		มีถูกod ird Slope		LJ			(Mcfd)	
			<del>-</del>								<b>†</b>		
	<del>                                     </del>			+							┼		
	l .												
Open Flow			Mcfd @ 14.0	65 psia		Deliverabi	llty			Mcfd @ 14.65 ps	ia		
The under	signed #	authority of	behalf of the	Company s	itetes that h	ne la duty eur	thorized to	meke th	e above reno	rt and that he ha	s knou	iledne of	
	•	•							•			-	
he facts stated	therein,	and that sa	id report is true	and correc	t. Executed	this the	<u> </u>	day of	JAPIEIU	BEIZ	naraniari 1	20 <u>/                                    </u>	
							B-C	574	EL EDIT	L.L.C.			
Witness (il any)								Mary Same	For C	Company			
dhii ilicalaa dhiistalla licaasta dhe			w. <del></del>		<del></del>	_				nh ad hu	<del>DE</del> f	<del>`E \/E</del> T	
		For Comm	nafez						Chec	cken by	תבנ	JEI V EL	
												à c 20	

OCT 0 6 2010 KCC WICHITA

	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator <u>B-C 57EEL LLC</u>						
	t the foregoing pressure information and statements contained on this application form are true and						
	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							
						J	
							(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						
	ther agree to supply to the best of my ability any and all supporting documents deemed by Commission necessary to corroborate this claim for exemption from testing.						
Date:	9-30-10						
	l-dl-						
	Signature:						
	Title: <u>GENRAL MANAGER</u>						

+6206253302

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.

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## B-C MANAGEMENT SERVICES CORP

P.O. BOX 326

YATES CENTER, KS 66783

OFFICE: 620-625-2999 FAX: 620-625-3302

FACSIMILE TRANSMITTAL SHEET							
To:	FROM: 0						
JIM HEMMEN	REX HORNING						
COMPANY:	DATE:						
COUSEKUATION DILISION OFFICE	10-6-10						
FAX NUMBER:	TOTAL NO. OF PAGES INCL. COVER:						
<u> 316-357-6211</u>	5						
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:						
<u> 316 - 337-6200</u>							
RE:	YOUR REFERENCE NUMBER:						
DAUIS#2 #2 OFTEST							
☐ URGENT ☐ FOR REVIEW ☐ PLEASE COM	MMENT   PLEASE REPLY   PLEASE RECYCLE						
NOTES/COMMENTS:							

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