KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:	سر			(See Instruc	tions on Re	everse Sid	e)					
			国24 h	2. JI	Test Date	e :			APi	No. 15				
	liverat	oilty			11-10-2	005			023	3-20535-00	.00	· · · · · · · · · · · · · · · · · · ·		
Company Rosewo		sou	rces, Inc.				Lease Ella Ma	ae				3-3	Well Nu	mber
County Location Cheyenne SENW				Section 3		TWP 3S			W)			Acres A 80	ttributed	
Field Cherry Creek					Reservoi	Reservoir				hering Conn				
Completi 7-15-20	on Dat	e				Plug Back Total Depth			Packer Set at					
Casing Size Weight				Internal I 4.052	Diameter				Perforations		To 1582'			
4 1/2" 10.5# Tubing Size Weight				Internal I	Diameter		Set at Perforations				To To			
NONE Type Cor	•	•	•		• •	d Production	n			nit or Traveling	g Plunger	? Yes	/ No	
Single (nulus / Tubing)		Dry Gas % Carbon Dioxide				flowing % Nitrogen Gas			avity - G	i.
Annulu	-	V		,						,		.6	,	-g
Vertical D	Depth(H	1)				Pres Flan	sure Taps ae					(Meter F	Run) (Pr	over) Size
Pressure	Buildu	p:	Shut in11-1	10 2	05 at 1	2:10	-	Taken 1	1-11-	20	05 at_	12:23	(AM) (PM))
Well on L	.ine:		Started 11-1		05 at 1	2:23	(AM)@M	Taken 1	1-20	20	05 at _	12:30	(AM) (M)
-: -						OBSERVE	D SURFAC	E DATA			Duration	of Shut-i	_{in} 24	Hour
Static / Dynamic Property	Siz	Size Meter Different		II	Flowing Well Head Temperature t t		(P _w) or (P _t) or (P _c)		Wellhe	Tubing Wellhead Pressure (P_w) or (P_t) or (P_c)		Duration Liquid Prod (Hours) (Barrels		
Shut-In	psig (Pm)		Inches H ₂ 0			psig 48	62.6	psig psia						
Flow							45	59.6			24		0	
						FLOW STR	REAM ATTI	RIBUTES						
Plate Coefficcient (F _b) (F _p) Mcfd		Pro	Circle one: Meter or over Pressure psia	Press Extension P _m xh	Grav Fac F	tor	Flowing Femperature Factor F _{f1}	F	viation actor F _{pv}	Metered Flo R (Mcfd)		(Cubic Feet/ Grav		Flowing Fluid Gravity G _m
										12				
D \2			/D \2		•	OW) (DELIV		•					= 0.20	07
P _c) ² =		=:-	(P _w) ² =	Choose formula 1 or 2	P _d =			(P _c - 14.4) +		<u>'</u>	ļ	(P _d) ²	1	
$(P_c)^2 - (P_e)^2$ or $(P_c)^2 - (P_d)^2$				LOG of formula 1. or 2. and divide p2.p2		Backpressure Curve Slope = "n" or Assigned		n x	n x LOG		Antilog De		en Flow verability R x Antilog Mcfd)	
				flvided by: P _c ² - P _w ²	. by:		Stan	dard Slope						The second
									-			- B N		
Open Flo	w			Mcfd @ 14.	65 psia		Delivera	bility			Mcfd @	ے لیا 14.65 psi	a J	J 2005
				behalf of the						ne above repo	ort and th	at no na	2	G-117
			Witness (if	any)		le			//	For	Company	(100	Je fo	
			For Commi	ssion					<u>.</u>	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 Rosewood Resources, Inc.	
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 Ell Mae 3-3	
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 Commission	
staff as necessary to corroborate this claim for exemption from testing.	
Date: 12-27-2005	
	I
Signature:	
Title: Production Foreman RECEIVE	4
DEC 3 0 200	j
REC WICH	
	الـ

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.

Well Name: Ella Mar. 3-3

٠.,

Monthly Gauge Sheet					
			•		
Well Na	ime:E11a	Mae	3-3	Month: 1/05	5
Date	MCF	ТР	СР	Wtr	Remarks
1	11		46	et	•
3	11		45		
4 5	11		45		
ô	11		46	N. C.	
<u>7</u> 	11		74		CD 3 ha
9 10	10		53		shutin@12:10P@ 48 psg
11	Ø 12		140		open @ 12:23P@ 140 PSI
13	13	N	54		
15	13	·.	99 49		
16 17	12	· · ·	49		
18 19	12		47		
20	17		U/S U/3		
22 23	12		62		RECEIVED
24	11	7.	41 41		DEC 3 0 2005
25 26) a		40		KCC MICHITA
27 28	6		70		CD6
29 30	12		67		000
31	:, :-:				
	÷.				

*

		<u></u>				
t 4 o o t in ly	Gauge Sheet					
Monuny	Gauge Sheet					
	-211 -	104		15.1	<u> </u>	
Well Na	me:Ella	Mae 3	3-3	Month: (O)()\$	
1			· · · · · · · · · · · · · · · · · · ·	/		
Date	MCF	TP	СР	Wtr	Remarks	
1	· 11		4C			
2	1)		45 43			
3	11		43			
4	11		43			
5	11		43			
6	11		42			
7	11		43		-	
8	11		45			
9	(1		45		cry '	
10	10		76		CD	
11	10		/0		GD	
13	11	<u> </u>	76			
14	6 1		116			
15	11	:,	W 2			
16	11		<i>42</i>			
17	11		40			
18	1/		43			
19),		46			
20	11		46			
21	11		45		DE	CENED
22	10		US			CEIVED
23	10		46		DEC	3 0 2005
24 25	T		46 46 45 48 46 46 43 43 45 45 45		KCC	WICHITA
26	10		43		<u> </u>	
27	ii		45			• • •
28	11		43			
29	11		45			
30	П		45			
31	<i>)[</i>		45			

ei, i

. ...,

•••;