

KANSAS CORPORATION COMMISSION

ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:

- Open Flow
 Deliverability

SI

(See Instructions on Reverse Side)

Test Date:
9/12/2006

API No. 15
023-20629-00-00

Company Rosewood Resources, Inc.		Lease R. Walter		Well Number 21-21	
County Cheyenne	Location NENW/4	Section 21	TWP 3S	RNG (E/W) 41W	Acres Attributed 80
Field St. Francis		Reservoir Niobrara	Gas Gathering Connection Branch Systems Inc.		
Completion Date 10/22/2005		Plug Back Total Depth 1518'	Packer Set at		
Casing Size 2 7/8"	Weight 6.5#	Internal Diameter 2.441	Set at 1518'	Perforations 1371'	To 1403'
Tubing Size NONE	Weight	Internal Diameter	Set at	Perforations	To
Type Completion (Describe) Single (Vertical)		Type Fluid Production	Pump Unit or Traveling Plunger? Yes / <input checked="" type="radio"/> No		
Producing Thru (Annulus / Tubing) Annulus		% Carbon Dioxide	% Nitrogen	Gas Gravity - G _g .6	
Vertical Depth(H) 1403'		Pressure Taps Flange		(Meter Run) (Prover) Size 2"	
Pressure Buildup: Shut in 9-12 20 06 at 11:10 (AM) (PM) Taken 9-13 20 06 at 3:10 (AM) (PM)					
Well on Line: Started 9-13 20 06 at 3:10 (AM) (PM) Taken 9-14 20 06 at 12:10 (AM) (PM)					

OBSERVED SURFACE DATA

Duration of Shut-in 24 Hours

Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter Prover Pressure psig (P _m)	Pressure Differential in Inches H ₂ O	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)
						psig	psia	psig	psia		
Shut-In						260	274.4				
Flow						1	15.4			24	0

FLOW STREAM ATTRIBUTES

Plate Coefficient (F _b) (F _p) Mcfd	Circle one: Meter or Prover Pressure psia	Press Extension $\sqrt{P_m \times h}$	Gravity Factor F _g	Flowing Temperature Factor F _{tt}	Deviation Factor F _{pv}	Metered Flow R (Mcfd)	GOR (Cubic Feet/ Barrel)	Flowing Fluid Gravity G _m
						7		

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

(P_c)² = _____ ; (P_w)² = _____ ; P_d = _____ % ; (P_c - 14.4) + 14.4 = _____ ; (P_a)² = 0.207 ; (P_d)² = _____

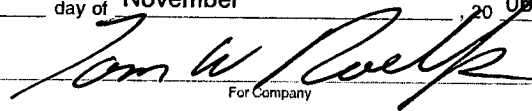
(P _c) ² - (P _a) ² or (P _c) ² - (P _d) ²	(P _c) ² - (P _w) ²	Choose formula 1 or 2: 1. P _c ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _w ²	LOG of formula 1. or 2. and divide by: P _c ² - P _w ²	Backpressure Curve Slope = "n" ----- or ----- Assigned Standard Slope	n x LOG []	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)

Open Flow Mcfd @ 14.65 psia Deliverability Mcfd @ 14.65 psia

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the 27 day of November 20 06

Witness (if any)

For Commission



For Company

Checked by

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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.

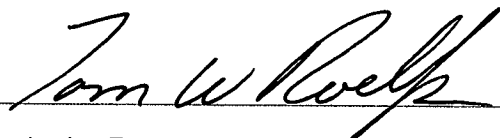
I hereby request a one-year exemption from open flow testing for the R. Walter 21-21 gas well on the grounds that said well:

(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: 11/27/2006

Signature: 
Title: Production Foreman

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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Monthly Gauge Sheet

Well Name: R. Walters 21-21

Pumper: _____

Month 8/06

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	181		0			168		Shot In
2	169		0			156		opened to 10 (11 met)
3	167		8			154		
4	166		10			153		
5	166		10			153		
6	166		10			153		
7	167		10			154		
8	169		9			156		
9	169		9			156		
10	168		9			155		
11	169		9			156		
12	168		9			155		
13	168		9			155		
14	162		9			149		
15	154		7			141		
16	155		8			142		Pinched in
17	165		9			152		
18	167		9			154		
19	165		9			152		
20	165		9			152		
21	164		9			151		
22	164		9			151		
23	162		9			149		
24	164		9			151		
25	164		9			151		
26	162		9			149		
27	162		9			149		
28	163		8			150		
29	163		8			150		
30	163		8			150		
31	163		9			150		

Totals

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Monthly Gauge Sheet

SI

Well Name: R Walter 21-21

Pumper: _____

Month 9/06

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	162		4			149		colours
2	159		8			146		
3	159		8			146		
4	157		8			144		
5	157		8			144		
6	152		8			138		
7	157		8			144		
8	156		8			143		
9	156		8			143		
10	156		8			143		
11	156		8			143		
12	156		7			143		SI 11:10 CP 122
13	—		1			—		open 3:10 CP 260
14	158		6			145		meter GA Rid Disable)
15	154		8			141		
16	152		7			139		
17	134		7			121		
18	134		7			121		
19	132		7			119		
20	130		7			117		
21	130		7			117		
22	134		7			121		
23	132		7			109		
24	168		7			155		CD 9 hrs
25	132		6			119		
26	126		7			113		
27	126		7			113		
28	121		6			108		
29	122		6			109		
30	124		6			111		
31								

Totals

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