



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.

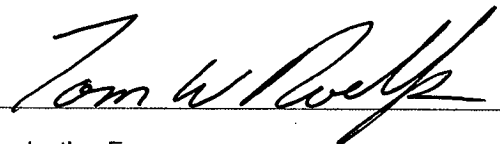
I hereby request a one-year exemption from open flow testing for the R. Walter 33-21 gas well on the grounds that said well:

(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: 11-28-2006

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. Walter 33-21

Pumper: \_\_\_\_\_

Month 8/06

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	19		0			6		
2	21		0			8		
3	30		0			17		
4	29		0			16		
5	29		0			16		
6	29		0			16		
7	30		0			17		
8	32		0			19		
9	31		0			18		
10	152		0			140		CP @ well 140 Flow @ 9
11	134		6			121		
12	126		5			113		
13	128		5			115		
14	124		4			111		
15	118		4			105		Pinched in
16	151		7			138		
17	149		7			136		
18	147		7			134		
19	147		6			134		
20	144		7			131		
21	147		7			134		
22	147		7			134		
23	145		7			132		
24	145		6			132		
25	144		6			131		
26	149		6			134		
27	149		6			134		
28	144		6			131		
29	149		7			131		
30	144		7			131		
31	149		7			136		

Totals

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Monthly Gauge Sheet

Well Name: R. Walter 33-2

SI

Pumper: \_\_\_\_\_

Month 9/06

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	152		4			139		CP 10 hrs
2	149		7			136		
3	148		7			135		
4	149		7			136		
5	147		7			134		
6	152		7			139		
7	149		7			136		
8	147		7			134		
9	147		7			134		
10	147		7			134		
11	147		7			134		
12	147		7			134		SI 11:00 CP 230
13	—		1			—		open 3:20 CP 265
14	152		5			139		
15	149		7			136		
16	149		7			136		
17	147		7			134		
18	152		7			139		
19	151		7			138		
20	150		7			137		
21	150		7			137		
22	155		7			142		
23	154		7			141		
24	168		7			155		CP 9 hrs
25	149		5			136		
26	150		7			137		
27	151		7			138		
28	150		7			137		
29	148		7			135		
30	150		7			137		
31								

Totals

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