Form G-2
(Rev. 7/03)

KANSAS CORPORATION COMMISSION
ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test: *(See Instructions on Reverse Side)*

☑ Open Flow
☐ Deliverabilty

Test Date: 12/11/2006

API No. 15: 181-20424-01-00

Company	Lease	Well Number
Rosewood Resources, Inc.	Homestead	14-05H

County	Location	Section	TWP	RNG (E/W)	Acres Attributed
Sherman	SWSW/4	5	7S	39W	80

Field	Reservoir	Gas Gathering Connection
Goodland	Niobrara	Branch Systems Inc.

Completion Date	Plug Back Total Depth	Packer Set at
10/13/2006	3392'	

Casing Size	Weight	Internal Diameter	Set at	Perforations	To
4 1/2"	10.5#	4.000	3392'	3325'	3340'

Tubing Size	Weight	Internal Diameter	Set at	Perforations	To
NONE					

Type Completion (Describe)	Type Fluid Production	Pump Unit or Traveling Plunger? Yes / (No)
Single (Horizonal)	Dry Gas	Flowing

Producing Thru (Annulus / Tubing)	% Carbon Dioxide	% Nitrogen	Gas Gravity - G_g
Annulus			.6

Vertical Depth(H)	Pressure Taps	(Meter Run) (Prover) Size
3400'	Flange	2"

Pressure Buildup: Shut in _____ 20___ at _____ (AM) (PM) Taken _____ 20___ at _____ (AM) (PM)

Well on Line: Started 12-11 20 06 at 8:45 (AM) (PM) Taken 12-12 20 06 at 9:15 (AM) (PM)

OBSERVED SURFACE DATA

Duration of Shut-in 24 Hours

Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter Prover Pressure psig (Pm)	Pressure Differential in Inches H_2O	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P_w) or (P_t) or (P_c) psig	Casing Wellhead Pressure psia	Tubing Wellhead Pressure (P_w) or (P_t) or (P_c) psig	Tubing Wellhead Pressure psia	Duration (Hours)	Liquid Produced (Barrels)
Shut-In						54	68.4				
Flow						12	26.4			24	0

FLOW STREAM ATTRIBUTES

Plate Coeffiecient (F_b) (F_p) Mcfd	Circle one: Meter or Prover Pressure psia	Press Extension $\sqrt{P_m x h}$	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
						38		

(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" / 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 12 day of February 20 07.

Witness (if any)

For Company

For Commission

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 Homestead 14-05H 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: 2/12/2007

Signature: Tom W Rodgers

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.

Monthly Gauge Sheet

Well Name: Homestead 14-05H

Pumper: _____ Month 12/06

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								Put on line 8:45A
12	61		23			48		22mcf 54#CP
13	59		24			46		
14	58		19			45		CD
15	57		23			44		
16	57		23			44		
17	59		23			46		opened
18	29		49			16		
19	27		48			14		
20	26		45			13		
21	26		43			13		
22	25		40			12		
23	25		38			12		
24	25		38			12		
25	23		38			10		
26	23		38			10		
27	24		38			11		
28	24		37			11		
29	24		37			11		
30	24		37			11		
31	23		37			10		
		Totals						

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Monthly Gauge Sheet

Well Name: Homestead 14-05 H

Pumper: _____

Month 1/07

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	23		35			10		
2	22		32			9		
3	22		29			9		
4	22		34			9		
5	30		32			17		
6	31		31			18		
7	35		32			18		CO4hrs
8	31		31			18		
9	23		32			10		
10	23		31			10		
11	22		32			9		BP
12	22		31			9		
13	22		31			9		CO4
14	22		30			9		
15	21		27			8		
16	21		27			8		
17	21		31			8		
18	21		30			8		
19	20		29			7		
20	20		29			7		
21	21		25			8		CO4
22	20		26			7		
23	21		28			8		
24	21		28			8		
25	21		28			8		
26	22		27			9		
27	21		26			8		
28	21		26			8		
29	22		25			9		
30	22		26			9		
31	21		23			8		
Totals								

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Monthly Gauge Sheet ✓

Well Name: Homestead 14-05H

Pumper: _____ Month 2/07

Day	Static	Diff	MCF	Wtr	TP	CP	SPM Cycle	Remarks
1	21		28			8		
2	21		25			8		
3	29		25			12		
4	29		25			12		
5	21		24			8		
6	22		26			9		
7	25		24			12		
8	21		25			8		
9	20		25			7		BP flow
10	20		25			7		
11	20		24			7		
12	21		25			8		
13	35		22			22		
14	23		19			20		
15	22		22			9		
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