KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test			0		(See Instruct	ions on Rev	erse Side,)					
= '	en Flo liverat					Test Date: 4/15/08				API No. 15 181-20281 • 🛇 • 🗢				
Company	,	DI 10	CTION, IN		4/10/00	Lease TRACHSEL						Well Number		
County			Locat		Section		TWP 8S	OLL	RNG (E/	W)	,	Acres Attributed		
SHERN			NE/4		5 Reservoir		85		Gas Gat	hering Conn				
Completic			AS FIELD			K Total Dept	h		Packer S		TION, INC.			
6 /18 / 90 Casing Size Weight					950'	Diameter	Set at		Perfo	rations	To			
4.5			10.5#	<u> </u>			998'		998		1055' To			
Tubing Si	ze		Weigh	nt	Internal C	Jameter	Set a				-			
Type Con			escribe)		Type Flui	Type Fluid Production			Pump Ur	nit or Traveling NO	Plunger? Yes / No			
Producing	Thru	(Anı	nulus / Tubin	g)	% C	% Carbon Dioxide			% Nitrog	en		Gas Gravity - G _g .59		
Vertical D		1)				Pressure Taps					•	Run) (Prover) Size TER RUN		
Pressure		ıp:	Shut in	4 2	08 at 10	0:45	(AM) (PM)	Taken_4/	15	20	08 _{at} 12:00	(AM) (PM)		
Well on L	ine:										at	(AM) (PM)		
				 		OBSERVE	D SURFACE	DATA			Duration of Shut-i	n 24.50 Hours		
Static / Dynamic Property	Orif Siz (inch	e	Gircle one: Meter Prover Pressi psig (Pm)	1	Flowing Temperature t	Well Head Temperature t	Casi Wellhead F (P _w) or (P ₁	ressure	Wellhe	fubing ad Pressure (P _t) or (P _c)	Duration (Hours)	Liquid Produced (Barrels)		
Shut-In			psig (riii)	Inches H ₂ 0			psig 21	psia	psig	psia				
Flow											· · · · · · · · · · · · · · · · · · ·			
	- 1			T		FLOW STR	EAM ATTRI	BUTES						
Plate Coefficci (F _b) (F Mcfd	ient p)	Pro	Circle one: Meter or over Pressure psia	Press Extension Pmxh	Grav Fact F	tor T	Flowing emperature Factor F _{II}	Fac	ation ctor	Metered Flow R (Mcfd)	(Cubic Fee Barrel)	Flowing Fluid Gravity G _m		
i					<u> </u>			<u> </u>						
(P _c) ² =			(P)² =		(OPEN FLO		ERABILITY) 6 (P.	CALCUL - 14.4) +			(P _a) ² (P _a) ²	= 0.207		
(P _e) ² - (F		(F) ² - (P _w) ²	Choose formula tors 1. Pc2 Pc2 2. Pc2 Pc2 christed by: Pc2 Pc3	LOG of formula 1. or 2. and divide	P ^c ₅ · P ^e ₅	Backpres Slope Ass	sure Curve =="n" or igned rd Slope	nxi	roe [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
												,		
				-	<u> </u>		<u></u>							
Open Flow Mcfd @ 14.65										Mcfd @ 14.65 psia to make the above report and that he has knowledge of				
		•	•	n behalf of the aid report is true	• •				make that a standard the standard that the standard that the standard term is a standard that the standard that the standard that the standard that the standard term is a standard term is a standard that the standard term is a sta	•	rt and that he ha	s knowledge of		
ine lacis si	1000	116161	n, and mat s	aid report is tide	and conec	. Executed	uns the	······································		luc	Parle	24		
			Witness (if any)			RECEIV	- b	100	ForC	ompany			
			For Comn	nission		KANSAS C	ORPORATION	COMMIS	SION	Chec	ked by			

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exempt and that correct of equip	status under Rule K.A.R. 82-3-304 on behalf of the operator LOBO PRODUCTION, INC. It 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 the statement installation and/or upon type of completion or upon use being made of the gas well herein named breby request a one-year exemption from open flow testing for the TRACHSEL 1
	Il on the grounds that said well:
	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
	rther agree to supply to the best of my ability any and all supporting documents deemed by Commiss necessary to corroborate this claim for exemption from testing.
Date: _	7/31/08
·	Signature: John Lewden. Title: OWNER/OPERATOR

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.