KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

Type Test					(See Instruct	ions on Hev	erse Siae	?)				
= '	en Flo liverab				Test Date					No. 15			
Company	,	-	<u> </u>		12/29/10	U	Lease		15-0	007-22836-0	0000	Well No	umber
	EY O	PER	RATING CON				CLARKE	<u> </u>			#2		
County BARBER			Location C _. SE SW		Section 5		TWP 32S		RNG (E/W) 12W		Acres	Attributed	
				Reservoir MISSISSIPPI			Gas Gathering Connection APC						
Completion Date 1/6/05				Plug Back Total Depth 4420			h		Packer Set at NONE				
Casing Size 4.500		Weight 10.50		Internal Diameter 4.052		Set at 4419		Perforations 4220		To 4234	то 4234		
Tubing Size 2.375			Weight	***	Internal Diameter 1.995		Set at 4196		Perforations OPEN		Ťo	·	
Type Completion (Describe) SINGLE			Type Flui	Type Fluid Production WATER			Pump Unit or Traveling Plunger? Yes / No PUMPING						
Producing	Thru	(Anı	nulus / Tubing)			arbon Dioxi	de		% Nitrog		Gas (Gravity -	G _g
Vertical D		1)		· ·		Press	sure Taps				(Mete	r Run) (F	Prover) Size
4227 Pressure	Buildu	n:	Shut in	8/10	0 at	<u> </u>	(AM) (PM)	Taken 12	2/29/10	20	at		(AM) (PM)
Well on L		•									at		, , , ,
						OBSERVE	D SURFACE	DATA			Duration of Shu	ut-in	Hou
Static / Orifice Dynamic Size Property (inches)		e	Circle one: Meter Prover Pressur		Flowing Temperature t	Flowing Well Head Temperature		Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Liqu	id Produced (Barrels)
Shut-In			psig (Pm)	Inches H ₂ 0			psig 70	psia	psig 50	psia	24		
Flow													
			,			FLOW STR	EAM ATTRI	BUTES					
Plate Coeffiecient (F _b) (F _p) Mcfd		Pro	Circle one: Meter or over Pressure psia	Press Extension √ P _m x h	xtension Fact		tor Temperature		riation actor = pv	Metered Flow R (Mcfd)	(Cubic Barre	Feet/	Flowing Fluid Gravity G _m
	1		<u> </u>										
(P _c) ² =		_:	(P _w) ² =_	:	(OPEN FL		ERABILITY) % (P	calcul ូ - 14.4) +		:		$(a_a)^2 = 0.2$ $(a_b)^2 = 0.2$	207
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(F	P _o) ² - (P _w) ²	hoose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ ivided by: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide p 2 p 2		Backpressure Curve Slope = "n" or Assigned Standard Slope		n x LOG		Antilog C		pen Flow liverability is R x Antilog (Mcfd)
									<u> </u>			<u> </u>	
Open Flor				Mcfd @ 14.			Deliverabi				Mcfd @ 14.65 p		
		•	d authority, on in, and that sai				•			•	rt and that he		vledge of 20
									Wm.	Stella	Q^{-}	,	
•			Witness (if	any)			· thoras			For	ompany		
			For Commis	sion			_		·	Chec	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 WOOLSEY OPERATING CO., LLC 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 CLARKE #2 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 mct/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: 12/29/10		
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Signature: Min Mullayh Title: FIELD MGR.	Date.	

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.