KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test: | | | (- | See Instructi | ons on Reve | rse Side |) | | | |
|--|--|--|------------------------------------|---------------------------------------|--|--|---------------------------|---|--|--|
| Open Flow Deliverability | | | Test Date 11-1&2 | | | | API 15 | No. 15 -00 7-20524 | - 0000 | , |
| Company HERMAN L. LC | DEB ; | * ; 1* | | 1 | Lease McBRA | YER | | . , | · | Vell Number |
| County BARBER | Location 100'NW OF | | Section | | TWP | | RNG (E. | | | Acres Attributed |
| ALINA | ර ද සොස්ර | Taken of | Reservoir MISSIS | SSIPPI | ٠, , | | ONEC | hering Conne OK FIELD S | IVCS. | |
| Completion Date 7-8-77 | -, · | tional Significan | | k Total Depth | ı | | Packer S NONE | Set at | · • • • • • • • • • • • • • • • • • • • | . ! · · · · · · · · · · · · · · · · · · |
| Casing Size 4.500 | Weight 10.50 | | Internal Diameter 3.927 | | Set at 4802 | | Perforations 4742. | | | |
| Tubing Size Weight 2.375 4.70 | | Internal Diameter 1.995 | | Set at 4760 | | Perforations OPEN | | То | | |
| Type Completion (Describe) SINGLE | | | Type Fluid Production OIL,WATER | | | Pump Unit or Traveling Plunger? Yes / No PUMPING | | | | |
| Producing Thru (And | nulus / Tubing) | | % C | arbon Dioxid | le . | | % Nitrog | en (| Gas Gra | ıvity - G _g |
| Vertical Depth(H) | - • | E | | | | | | | (Meter F | tun) (Prover) Size |
| • | Shut in | | | | (AM) (PM) T | | | | | (AM) (PM) |
| Well on Line: | Started | 20 | 0 at | | (AM) (PM) T | aken | | 20 | at | (AM) (PM) |
| , i | · | | *** | | SURFACE | DATA | | |); Duration of Shut-i | n Hours |
| Static / Orifice Dynamic Size Property (inches) | Circle one: Meter Prover Pressure psig (Pm) | Pressure Differential in Inches H ₂ 0 | Flowing Temperature t | Well Head Temperature t | Casin Wellhead Pi (P _w) or (P _t) | essure | Wellhe | fubing ad Pressure r (P _t) or (P _c) | Duration (Hours) | Liquid Produced (Barrels) |
| Shut-In | | | | | 85 | μσια | poig | | 24 .; | * * |
| Flow | | | | | | | | | | |
| | <u> </u> | | | FLOW STRI | EAM ATTRIE | UTES | | | | |
| Plate Coefficient (F _b) (F _p) Mcfd Pro | Circle one: Meter or over Pressure psia | Press Extension P _m x h | Grav Fact F _g | tor Te | Flowing emperature Factor F _{ft} | Fa | iation ctor : pv | Metered Flow R (Mcfd) | GOR (Cubic Fee Barrel) | Flowing Fluid Gravity G _m |
| | | | | * * * * * * * * * * * * * * * * * * * | | * : | | | | |
| P _c) ² =: | (P _w) ² = | <i>J.</i> | (OPEN FLO | OW) (DELIVE | ERABILITY) | | ATIONS 14.4 = | : | (P _a) ² (P _d) ² | = 0.207 |
| | P _c) ² - (P _w) ² | 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ ded by: $P_c^2 - P_a^2$ | LOG of formula 1. or 2. and divide | P.2 - P.2 | Backpress Slope | ure Curve = "n" r | | ГП | Antilog | Open Flow Deliverability Equals R x Antilog (Mcfd) |
| 1.0 | | | . , | ·» | | 45 C.D. | | 1945 7 | 12 ¹ 02-1 | - |
| | , • - | والم المعادية | 155 | 3 · 5 | 0.0 | | ; v - | - 1 / 100° - , | | |
| The undersigner refacts stated there | in, and that said | | Company, s | t. Executed | this the 17 | norized to | | ne above repo | Mode @ 14.65 psi | |
| | Witness (if an | | 4 | | - | · · · · · · · · · · · · · · · · · · · | Le | Sor of For o | Old Kew. | RECEIV |
| | For Commissi | ion | | • | | ·- | | Chec | ked by | NECEIV |

KCC WICHITA

| t de alone moder e ee el | , , , , , , , , , , , , , , , , , , , | and the large of the | , + | Lancacathantan At | |
|--|---------------------------------------|----------------------|------------------------|---------------------------------------|----------|
| I declare under penal exempt status under Rule I | | | | _ | request |
| and that the foregoing pre | | | * . | | true and |
| correct to the best of my kr | | | | | |
| of equipment installation a | | | _ | _ | named. |
| I hereby request a one | year exemption | from open flow tes | sting for the McBRA | /ER #1-26 | î |
| gas well on the grounds th | at said well: | . 25 | 1286 | Desc. | - |
| (Check one) | 9190 | 784. | . Pyy., | • | |
| is a coa | albed methane pro | oducer | भवाच्या, स | • | |
| is cycle | ed on plunger lift o | due to water | | | |
| is a sou | urce of natural gas | s for injection into | an oil reservoir under | rgoing ER | |
| is on va | acuum at the pres | ent time; KCC app | roval Docket No | · · · · · · · · · · · · · · · · · · · | _ |
| is not c | apable of produc | ing at a daily rate | in excess of 250 mcf/ | D P P P | |
| | | | | • | ¥q |
| | nly to the best of r | ny ahility any and | all supporting docum | ents deemed by C | ommissio |
| I further agree to supp | ny to the best of it | iny admity arry arra | an capperang decam | • | |
| | | 4 ' ' 4 | , | • | |
| I further agree to supp staff as necessary to corro | | 4 ' ' 4 | , | • | |
| staff as necessary to corro | | 4 ' ' 4 | , | | |
| staff as necessary to corro | | 4 ' ' 4 | , | | |
| staff as necessary to corro | | 4 ' ' 4 | , | · · · · · · · · · · · · · · · · · · · | |
| | | 4 ' ' 4 | , | | |
| staff as necessary to corro | oborate this claim | for exemption fro | , | OlShem | |
| staff as necessary to corro | oborate this claim | for exemption fro | Lesly H. | Oldham | |
| staff as necessary to corro | oborate this claim | for exemption fro | , | Oldham | |
| staff as necessary to corro | oborate this claim | for exemption fro | Lesly H. | Oldham | |

Instructions:

H. ..

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 shuf-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.

HERMAN, L., LOEB LLC

OFFICE TELEPHONE: (618) 943-2227



FAX: (618) 943-2220

November 23, 2010

Jim Hemmen
Kansas Corporation Commission
Conservation Division – Legal Department
Finney State Office Bldg
130 S Market Room 2078
Wichita KS 67202-3802

RE: Les Oldham's Signature Authority for KCC Forms

Mr. Hemmen:

The management/directors of Herman L. Loeb, LLC hereby notifies the Conservation Division of the Kansas Corporation Commission that Mr. Les Oldham, as agent for Herman L. Loeb LLC can affix his signature to any and all KCC forms having to do with Herman L. Loeb LLC's gas/oil operations in Kansas and said signature will have the same binding authority upon the company as if an employee of or an officer in the company signed the form.

This authorization will remain in effect until you are otherwise notified.

Sincerely,

HERMAN L. LOEB LLC

Janette D. Loeb, Member/Manager

cc: Les Oldham

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