KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:	:			(-	See Instruci	ions on Re	verse Side)				
Op	en Flow			Test Date	,•			ADI	No. 15			
✓ Deliverabilty					May 25, 2010				NO. 15 0331001400	00		
Company Castelli Exploration, Inc.				Lease Huck Jobe			obe				Well Number 1-33	
County Location Comanche C SE NW			Section 33		TWP 33S			W)	Acres Attributed			
Field Beals				Reservoir Marmaton/Mississippian				Gas Gathering Connection Oneok				
Completion Date 11/12/63				Plug Back Total Depth N/A Nothing on Library or Dwights				Packer Set at N/A Nothing on Library or Dwights				
Casing Size Weight 5 1/2" N/A			Internal D		Set			rations 5/5014	То			
Tubing Size Weight			Internal D	Dlameter	Set at 4965		Perforations		To			
2 3/8" N/A Type Completion (Describe)				Type Fluid Production				Pump Unit or Traveling Plunger? Yes / No				
nmingled (Gas) Producing Thru (Annulus / Tubing)					% Carbon Dioxide			Plunger % Nitrogen		Gas Gr	Gas Gravity - G	
Tubing Vertical D	epth(H)				Pres	sure Taps				(Meter I	Run) (Prover) Siz	
Orogenso	Duildun	Shut is May	25	. 10 ., 8:	:00	/AM/ /DM/	Taken M	ay 26	20	10 at 8:00	(AAA) (DAA	
Well on Li	-									at		
	· ·				OBSERVE	D SURFAC	E DATA			Duration of Shut-	in 24 Ho	
Static / Dynamic Property	amic Size Prover Pres			Flowing Temperature 1	Well Head	Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In		psig (Pm)	Inches H ₂ 0			psig 652	psia 666.9	psig	psia			
Flow												
					FLOW STR	EAM ATTR	RIBUTES					
Plate Coeffieci (F _b) (F _c Mcfd	ient _P) <i>Pr</i> e	Circle one: Meter or over Pressure psia	Press Extension √ P _m x h	Grav Faci F	tor	Temperature Factor		viation Metered Flow actor R F _{pv} (Mcfd)		w GOR (Cubic Fe Barrel)	Flowing Fluid Gravity G _m	
				(OPEN FL	OW) (DELIV	ERABILITY) CALCUL	ATIONS		(P. V	s = 0.207	
(P _c) ² =		(P _w) ² =_	:	P _a =		% (P _c - 14.4) +	14.4 = _	:	(P _d)		
(P _c)²- (F or (P _c)²- (F		P _c) ² - (P _w) ²	1. P _a ² - P _a ² 2. P _a ² - P _d ² ivided by: P _a ² - P _d ²	LOG of formula 1. or 2. and divide	P, 2 . P, 2	Sid	essure Curve ipe = "n" - or ssigned dard Slope	. n x	rog	Antilog	Open Flow Deliverability Equals R x Antil (Mcfd)	
Open Flow Mctd @			Mcfd @ 14.	4.65 psia		Deliveral	Deliverability		Mc		 fot	
The t	undersigne	d authority, on	behalf of the	Company, s	states that h	e is duly a	uthorized t	o make ti	ne above repo	ort and that he ha	s knowledge of	
	_	in, and that sai		and correc		this the _1		day of A	•	,	, 20 10	
Witness (If any)				חב	DEC 2 3 2010			For Company				
		•••	**	UC	こしょうん	עוט						

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 Castelli Exploration, 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 Huck Jobe 1-33	
gas well 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 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.	1
RECEIVED DEC 2 3 2010 Signature: President Title: President	

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.