KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	;				(See Instructi	ions on Re	verse Side)					
✓ Op	en Flo	N			Test Date	. .			ΔΡΙΛ	No. 15				
Del	liverab	ilty			10/28/20					77-21482	2 - MAA)		
Company Atlas Operating LLC			_C		Lease DARNES "A"				4	Well Number				
County HARPER			Locat SW-N	ion IW-NE	Section NE 18		TWP 31		RNG (E/W) 8W		·	Acres Attributed		
Field SPIVEY GRABS			S			Reservoir MISSISSIPPI			Gas Gathering Cor		ection			
Completion Date 05/15/04			•		Plug Bac 4458	Plug Back Total Depth 4458		Packer Set		et at				
Casing Size 4 1/2			Weig 10.5	ht	Internal Diamet		er Set at 4604		Perforations 4403		то 4423	-		
Tubing Size 2 3/8			Weig 4.9	ht	Internal Dia		iameter Set at 4426		Perforations		То			
Type Con		n (D	escribe)			d Production	1		Pump Uni PUMP	t or Traveling UNIT	Plunger? Yes	/ No		
Producing Thru (An ANNULUS			nulus / Tubir	ng)		% Carbon Dioxid		e		% Nitrogen		Gas Gravity - G		
Vertical C		!)		- <u> </u>		Press	sure Taps						rover) Size	
Pressure	Buildu	p:	Shut in 10	/28	20 10 at			Taken 10	0/29	20	10 at		(AM) (PM)	
Well on L	.ine:	•									at			
			· •			OBSERVE	D SURFAC	E DATA			Duration of Shu	t-in _24	Haurs	
Static / Dynamic Property	Dynamic Size		Circle one: Meter Prover Press psig (Pm)	Differential in	Flowing Temperature t	Well Head Temperature t	I Wellhead Pressure		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In					-		95	pole	pag) pou				
Flow														
r	 ,				γ	FLOW STR	EAM ATTR	IBUTES					т——	
Ptate Coeffiecient (F _p) (F _p) Motd		Circle one: Meter or Prover Pressure psia		Press Extension ✓ P _m x h	Grav Fac F	tor T	Flowing Temperature Factor F _{rt}	Fa	riation actor - - pv	Metered Flow R (Mcfd)	GOF (Cubic F Barre	oov	Flowing Fluid Gravity G _m	
(P _c) ² = _	<u> </u>	_:	(P _w) ²	=:	(OPEN FL	OW) (DELIV		') CALCUL P _a - 14.4) +		:) ² = 0.2 ₁) ² =	:07	
$(P_a)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _e) ² - (P _w) ²		Choose formula 1 or 1. P _g ² - P _d ² 2. P _g ² - P _d ^d divided by: P _g ² - P	LOG of formula 1, or 2, and divide	P.2. P.2	Backpressure Cun Slope = "n" 		n x Le	og [Antilog	Del Equats	Open Flow Deliverability Equals R x Antilog (Mcfd)	
										-				
Open Fio				Mcfd @ 14	.65 psia		Deliverat	oility		<u>-</u> !	Mcfd ② 14.65 p	 sia		
The	unders	igne	d authority,	on behalf of the	Company,	states that h	e is duly a	uthorized t	o make the	above repo	rt and that he h	ias know	ledge of	
		_	-	sald report is tru			=			•			20 10	
			Witness	(if any)			-			For C	ompany	-RF1	CEIVED	
			EO-	mission			-							
			For Com	mis\$10A						Chec	ked by	NOA	1 2 201	

l ded	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt s	status under Rule K.A.R. 82-3-304 on behalf of the operator_Atlas Operating LLC
and that	the foregoing pressure information and statements contained on this application form are true and
correct to	o the best of my knowledge and belief based upon available production summaries and lease records
of equipr	ment installation and/or upon type of completion or upon use being made of the gas well herein named.
l her	reby request a one-year exemption from open flow testing for the
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
l furt	ther agree to supply to the best of my ability any and all supporting documents deemed by Commission
staff as i	necessary to corroborate this claim for exemption from testing.
Date: 11	1/04/2010
	\bigcirc
	Signature: Pamy LI-turas
	Title: Production Coordinator

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.