Form G-2 (Rev. 7/03)

مراع مرامات	~	ONE I				EN FLOV			RABILITY	TEST	
Type Test:			•	(5	See Instru	ctions on Rev	verse Side	e)	•		
Ope	n Flow							4.01	Na 45		
√ Deli	verabilty			Test Date:		1		1/50	No. 15 42147100 0	00	
Company Castelli	Explor	ation, Inc.				Lease Julian		15-04	 7-	#3-5	Vell Number
county Location Edwards NE NE SE		Section 5		TWP 25S			RNG (E/W) 16W		Acres Attributed .		
ield				Reservoir Chase					nering Connec	tion	
Vil		Plug Back Total Depth Total Depth		pth		Packer Set at 2494'					
10/18/0 Casing Si		Weight	· · · · · · · · · · · · · · · · · · ·	Internal D		Set a		Perfo	rations	то 2491'	
1 1/2" Tubing Siz			4.052 Internal Diameter		Set a	2528 Set at		2146' Perforations			
2 3/8"	nletion (4.7 Describe)		1.995	1 Producti	249	1	Pump Ur	it or Traveling I	Plunger? Yes	/ No
Single C	Sas Zor	ne Perforation		Saltwa	ter				ng Unit		avity - G
∍roducing Annulus		nnulus / Tubing	1)	% C	arbon Dio	exide .		76 14ILIOG	611	Quo 016	, <u></u> g
Vertical D					Pre	essure Taps				(Meter F	Run) (Prover) Size
Pressure	Buildun	Shut in Feb	ruary 10 ₂	0 11 _{at} 8:	00	(AM) (PM)	Taken F	ebruary	11 20	11 _{at} 8:00	(AM) (PM)
Well on L											(AM) (PM)
					silver				·		
		Circle one:	Pressure	Γ		VED SURFAC		-	Tubing	Juration of Shut-	in Hours
Static / Dynamic	Orifice Size	fice Meter Differential		Flowing Well Head Temperature Temperature		re Wellhead	Wellhead Pressure (P _w) or (P ₁) or (P ₂)		Wellhead Pressure (P _w) or (P _t) or (P _c)		Liquid Produced (Barrels)
Property	(inches)	psig (Pm)	in Inches H ₂ 0	t t		psig psia		psig psia		(Hours)	
Shut-In						155	169.4				
Flow											
					FLOW S	TREAM ATTE	RIBUTES				
Plate Coeffiec (F _b) (F McId	ient	Circle one: Meter or Prover Pressure psia	Press Extension P _m xh	Grav Fac F	tor	Flowing Temperature Factor F	F	viation actor F _{pv}	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	l Gravity
D 12		· (P \2 =	:	•	OW) (DEL	.IVERABILITY		LATIONS + 14.4 = _	·:		² = 0.207 ² =
			Choose formula 1 or			Backpre	essure Curv		ГЛ		Open Flow
(P _c) ² - (or (P _c) ² - ((P _c) ² - (P _w) ²	1. P _c ² · P _s ² 2. P _c ² · P _d ²	formula 1. or 2. and divide	P _c ² · P _w ²	Α	ope = "n" or ssigned dard Slope	n x	LOG	Antilog	Deliverability Equals R x Antilog (Mcfd)
			divided by: Pc2 - Pv	by:		Johan					
Open Flo	ıw		Mcfd @ 14	.65 psia		Delivera	bility			Mcfd @ 14.65 ps	ia
The	undersigi									rt and that he h	as knowledge of
ne facts s	stated the	erein, and that s	aid report is tru	e and corre	ct. Execu	ted this the _		_ day of	/		, 20
	n	Witness	(if any)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				J) (m	ompany	RECEIV
		For Com	nission			-			Chec	ked by	SEP 2 1
		roi Comi	111331011								ULI

KCC WICHITA

exempt state and that the correct to the of equipment of hereby	re under penalty of perjury under the laws of the state of Kansas that I am authorized to request tus under Rule K.A.R. 82-3-304 on behalf of the operator Castelli Exploration, Inc. e foregoing pressure information and statements contained on this application form are true and the best of my knowledge and belief based upon available production summaries and lease records not installation and/or upon type of completion or upon use being made of the gas well herein named. It is grounds that said well:
l furthe	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 er agree to supply to the best of my ability any and all supporting documents deemed by Commissions are corroborate this claim for exemption from testing.
Date: 08/1	9/11
	Signature:

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.

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