KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Rev	erse Side)				
op	en Flo	w			Test Date	_			40	No. 45			
De	llverab	ollty				;; k11-2011				No. 15 -097-21154	4-00-00		
Company HERM	, AN L	. LC	EB, LLC.				Lease CORSE		· · · · · ·		4-19	Well Nu	mber
County			Locatio	ON C SW/2 NE NE	Section 19		TWP 29S	<u> </u>	RNG (E 18W	(W)		Acres A	ttributed
Fleid NICHO	LS				Reservoir LANSI				Gas Gar SEMII	hering Conn	ection ELINE CO.		
Completic 8-11-85		e			Plug Bed 4701	k Total Dept	th	•	Packer ! NONE				
Casing S 5.500	ize		Weight 15.50		Internal 0 4.052	Diameter	Set at 4799		Perfo 451	rations 0	To 4603		
Tubing Size 2.375			Weight 4.70		Internal Diameter 1.995		Set at 4650		Perforations OPEN		То		
Type Con SINGLE		n (De	escribe)			d Production			Pump U		Plunger? Yes	/ No	
Producing	•	(Anı	nulus / Tubing)		arbon Dioxi			% Nitrog	en	Gas Gr	avity - G	3,
Vertical D		1)		•		Pres	sure Taps				(Meter I	Run) (Pr	over) Size
Pressure	Bulldu	D:	Shut In	0-11	:0 et		(AM) (PM)	Taken 10	-11-11	20	at	. (AM) (PM)
Well on L	ine:										at		
						OBSERVE	D SURFACE	DATA			Duration of Shut-	in_24	Hours
Static / Dynamic Property	Orifi Siz (inch	0	Circle one: Meter Prover Pressul psig (Pm)	Pressure Differentiat e in inches H _s 0	Flowing Temperature t	Well Head Temperature t	Casir Wellhead F (P _w) or (P ₁)	ressure	Wellhe	Rubing ad Pressure r (P ₁) or (P ₂) psla	Duration (Hours)		l Produced Barrels)
Shut-In				-			36	peia	psig	Tueste	24		
Flow													
						FLOW STR	EAM ATTRI	BUTES					
Piate Coefflect (F _b) (F Mcfd	ient		Circle one: Meter or ver Pressure pala	Press Extension P _m x h	Grav Fact F _s	tor T	Flowing Temperature Factor F ₁₁	Fa	ation ctor	Metered Flow R (Mcfd)	y GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G
				•	-	OW) (DELIV	ERABILITY)				(P _a):	² = 0.20	07
(P _c) ² =		<u>_:</u>	(P_)2 =_	<u> </u>	P _d =	°	% (P _e	- 14.4) +	14.4 =	<u> </u>	(P _d):	<u>' </u>	
(P _a) ² - (F or (P _a) ² - (F	- I	(P)2 - (P _w)2	1. Par Par 2. Par Par Middod by: Par Par	LOG of formula 1. or 2. and divide	P.*-P.*	Slope	sure Curve = "n" or gned rd Slope	nх	rog	Antilog	Deli Equals	en Flow verability R x Antilog Mcfd)
											_		
							<u> </u>					<u> </u>	
Open Flor	w			McId @ 14.	65 psla		Deliverabil	ity			Mcfd @ 14.65 psi	a	
The c	unders	lgned	authority, on	behalf of the	Company, s	tates that h	e is duly aut			-	rt and that he ha	s knowl	edge of
the facts si	tated ti	herel	n, and that sal	d report is true	and correct	t. Executed	this the 12	<u>TH</u> ,	tay of 0	ctober	01	, 2	11.
			Witness (ii	влу)				_&	Post	ul Sl	chan-		
			For Commis	ston		·	_			Chec	cked by	RECE	IVED-

OCT 13 2011

	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L. LOEB, LLC.
and that correct to of equipn	the 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 ment installation and/or upon type of completion or upon use being made of the gas well herein named. The request a one-year exemption from open flow testing for the CORSE # 4-19
I furt	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 ther agree to supply to the best of my ability any and all supporting documents deemed by Commission necessary to corroborate this claim for exemption from testing.
Date: <u>10</u>	Signature: <u>Les Lio J. Oldham</u>
	Title: REP. HERMAN L. LOEB LLC.

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.