KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | t: | | | | See Instruc | tions on Re | verse Side |) | | | | | |
|---|----------|--|---|--|--------------|---|--------------------|---|---------------------------|-----------------------------|----------------------|--|--|
| Op | en Flov | 4 | | Tank Date | | | | 4.00 | N- 45 | | | | |
| De | liverabi | ity | | Test Date 10-108 | : 11-2011 | | | | No. 15 -097-1007 | 6-00-00 | | | |
| Company HERM/ | | LOEB, LLC |) | | | Lease H.F. S | CHMID | Γ | | #1` | Well Nu | mber | |
| County KIOWA | \ | Loca N/E/ | ation 4 | Section 25 | | TWP 29S 19 | | RNG (E/W) | | Acres Attribute | | ttributed | |
| Fleid NICHO | LS | - | | Reservoi MISSIS | | | | | thering Conn NOLE PIPI | ection ELINE CO. | • | | |
| Completic 11-1-57 | | • | | Plug Bac 5069 | k Total Dep | th | Packer Set at NONE | | | | | | |
| Casing S 4.500 | İZƏ | Weig 10.5 | | Internal Diamete 4.000 | | Set 6 509 | | Perforations 4966 | | то 5010 | | | |
| Tubing Si 2.375 | lze | Wei | | Internal Diameter | | Set at 5030 | | Perforations OPEN | | То | | | |
| Type Completion (Describe) SINGLE | | | | Type Fluid Production GAS,WATER | | | | Pump Unit or Traveling Plunger? Yes / No PUMPING | | | | | |
| Producing Thru (Annulus / Tubing) ANNULUS | | | ing) | % Carbon Dioxide | | | | % Nitrog | jen | Gas Gr | Gas Gravity - G | | |
| Vertical D | |) | | | Pres | sure Taps | | | | (Meter I | Run) (Pr | over) Size | |
| Pressure | Buildup | : Shut In 10 | D-10-11 2 | 0 at | | (AM) (PM) | Taken 10 | -11-11 | 20 | at | | AM) (PM) | |
| Well on Line: | | | Started 20 | | | | | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | OBSERVE | D SURFAC | E DATA | | | Duration of Shut- | in_24 | Hours | |
| Static / Orifice Dynamic Size Property (inches) | | Meter Prover Pres | Differential | Flowing Well Ha Temperature Temperat t t | | Wellhead Pressure (P_u) or (P_t) or (P_t) | | Tubing Wellhead Pressure (P _w) or (P,) or (P _c) | | | | i Produced Sarrels) | |
| Shut-in | · | paig (i ii | iy inches ri _g o | | l | 100 | psla | psig | psia | 24 | | | |
| Flow | | | | | | | <u> </u> | | | | | | |
| | | ` | | _ | FLOW STR | EAM ATTR | IBUTES | | | | | | |
| Plate Coeffiecient (F _b) (F _p) Mcfd | | Circle one: Meter or Prover Pressure pala | Presa Extension | Gravity Factor F _g | | Tamporahica | | eviation Metered Flo Factor R F _{pv} (Mcfd) | | GOR (Cubic Fe Barrel) | eν | Flowing Fluid Gravity G _a | |
| (P _e) ² = | | · (D \2 | | (OPEN FLO | OW) (DELIV | , | - | | | _ | °= 0.20 | <u>_</u> D7 | |
| $(P_q)^2 - (P_a)^2$ or $(P_q)^2 - (P_q)^2$ | | .: (P _w) ² (P _s) ² - (P _w) ³ | Choose formula 1 or 2: 1. Pa - Pa 2. Pa - Pa divided by: Pa - Pa | p 2 - p 2 LOG of formula 1 or 2: p 2 - p 2 1. or 2. and divide p 2 - p | | Backpressure Ct Slope = "n" Assigned Standard Slop | | 1 | | (P _d): | Op Deli Equals | Open Flow Deliverability quals R x Antilog (McId) | |
| Open Flor | <u> </u> | | Mcfd @ 14.6 | 55 psla | | Deliverab | llity | | | Mcfd 9 14.65 psi | a | | |
| | | | on behalf of the sald report is true | | | | <u>2TH</u> . | day of _0 | ctober | ort and that he ha | | edge of to <u>11</u> . | |
| ······································ | | Witness | a (il eny) | | | _ | <u>~</u> | estie | H Olle | han Sompany RFC | EIVE | | |
| | | For Con | nmission | | | - | | | Chec | cked by | | | |
| | | | | | | | | | | OCT | 15 | [וענ | |

KCC WICHITA

| 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 HERMAN L. LOEB, LLC. |
|--|
| 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 theH.F. SCHMIDT #1 |
| 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 |
| 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. |
| Date: 10-12-11 |
| - 0 1 · · · 101 |
| Signature: <u>Les he H. Olkham</u> |
| Title: REP. HERMAN L. LOEB LLC. |
| |
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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.