KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

11- 4

| Type Test | t: | | | | (| See Instruct | tions on Re | verse Side |) | | | | |
|--|-------------------------------|----------------|--|--|------------------------------------|--------------|--|--|--|------------------------------|---------------------|---|--|
| Op | en Flo | W | | | Tool Date | | | | 40 | 1 No. 45 | | | |
| ✓ De | liverat | lity | | | Test Date 9/27/20 | | | | | I No. 15 -199-20373 | -0000 | | |
| Company Raven F | | rces | , LLC | | | | Lease Finley | | • | | #1-27 | Vell Number | |
| County Wallace | Coun | ty | Locati NE4 SE | | Section 27 | | TWP 11S | | RNG (E 42W | /W) | , | Acres Attributed | |
| Field | | | | | Reservoir | | | | | thering Conn | | ansas Pipeline) | |
| Completic 8/2008 | on Dat | e | <u>. –</u> | | Plug Bac 1242.77 | k Total Dept | th | | Packer : | Set at | | | |
| Casing S 4 1/2" | ize | | Weigh 10.5 | t | Internal E | Diameter | Set a | | Perfo | | | | |
| Tubing Si | ize | | Weigh | t | Internal C | Diameter | Set a | | | orations | То | | |
| Type Con | | | escribe) | | Type Flui Only G | d Production | | | Pump U No | nit or Traveling | Plunger? Yes | / (No | |
| Producing | | <u> </u> | nulus / Tubing | j) | | arbon Dioxi | de | | % Nitros | gen | Gas Gra | avity - G _g | |
| Tubing Vertical D | \ | | | | | Brook | ouro Tono | | | | (Mates F | Run) (Prover) Size | |
| 1300' | жер ип(г | | | | | - Fiest | sure Taps | | | | .500" | turi) (Prover) Size | |
| Pressure | Buildu | p: | Shut in | 72 | 0 11 at 1 | | (PM) | | | | 16 at 10 am | (AM)(PM) | |
| Well on L | ine: | | Started 9/2 | <u>7 </u> | 0 16 at 1 | u am | (AM) (PM) | Taken 9/ | 28 | 20 | 11 at 10 am | (AM) (PM) | |
| | | | r | · · · · · · · · · · · · · · · · · · · | | OBSERVE | D SURFAC | E DATA | , | | Duration of Shut-i | n 24 Hours | |
| Static / Oynamic Property | Dynamic Size | | Circle one: Mater Prover Pressu psig (Pm) | Pressure Differential in Inches H ₂ 0 | Differential Temperature Tempe | | reture (P _*) or (P _t) or (P _c) | | Tubing Wellhead Pressure $(P_w) \text{ or } (P_t) \text{ or } (P_o)$ psig psia | | Ouration (Hours) | Liquid Produced (Barrels) | |
| Shut-In | .500 |) ^H | 14.5 | 0 | | | psig 8 | psia | 8 | psia | 24 | 0 | |
| Flow | .500 |)" | 15 | 4 | | | 5 | | 5 | | 24 | 0 | |
| | | | | | <u> </u> | FLOW STR | EAM ATTR | IBUTES | | | | | |
| Plate Coeffiec (F _b) (F Mold | lent ,) | Pro | Circle one: Meter or over Pressure psla | Press Extension P _m xh | Grav Faci F | or 1 | Flowing Femperature Factor F _{ft} | Fa | ation ctor | Metered For RRE (Mcfd) | Barrel) | Flowing Fluid Gravity G_ | |
| | | | | | (OPEN EL) | OW) (DELIV | EDARII ITY |) CALCUL | ATIONS | KCC | MICLUES | | |
| (P _e) ² = | | _: | (P _w) ² = | : | P _d = | | | , OALOOL , - 14.4) + | | : | WICHITA! | = 0.207 = | |
| (P _e) ² - (I or (P _e) ² - (I | P _a) ² | (F | P _c) ² - (P _w) ² | Choose formula 1 or 2 1. $P_0^2 - P_0^2$ 2. $P_0^2 - P_0^2$ divided by: $P_0^2 - P_0^2$ | LOG of formula 1, or 2, and divide | P.2. P.2 | Slop | ssure Curve De = "n" or signed ard Slope | пх | roe | Antilog | Open Flow Deliverability Equals R x Antilog (Mcfd) | |
| | | | | | | | <u> </u> | | | | | <u> </u> | |
| Open Flo | <u> </u> w | | | Mcfd @ 14. | 65 nsia | | Deliverab | ility | | | Mcfd @ 14.65 psi | | |
| | | | - خاسمطاری ما | | | totor that h | | · | make 4 | | | | |
| | | _ | • | eid report is true | | | | IN H | Maxe to | Nou | ompan | , 20 <u></u> | |
| | | | For Comm | | | | _ | | | | ked by | | |

| I declare under penalty of periusy under the lowe of the etete | of Konnes that Law outhorized to request |
|--|--|
| I declare under penalty of perjury under the laws of the state exempt status under Rule K.A.R. 82-3-304 on behalf of the operator | · |
| and that the foregoing pressure information and statements cont | |
| correct to the best of my knowledge and belief based upon availab | • • |
| of equipment installation and/or upon type of completion or upon us | · |
| I hereby request a one-year exemption from open flow testing | |
| as 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 o | il reservoir undergoing ER |
| is on vacuum at the present time; KCC approva | Docket No |
| is not capable of producing at a daily rate in ex | cess of 250 mcf/D |
| I further agree to supply to the best of my ability any and all s | upporting documents deemed by Commissio |
| taff as necessary to corroborate this claim for exemption from te | sting. |
| Date: 11/10/1/ | RECEIVED |
| pate: M// U/M | |
| | NOV 1 4 2011 |
| | KCC WICHITA |
| Signature: | |
| Title: _Managing N | Member |

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.

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

| Type res | ۸. | | | | | • | 000 111301 | 0000113 | <i>311</i> F161 | varsa siud | " | | | | | | |
|--|----------------------|----------------------------------|---|----------|---|------------------------------------|---|---|--|---|--------------------------|-------------------------------|---|--|----------------|---|--|
| = : | pen Flor ellverab | | | | | Test Date 9/27/20 | | | | | | No. 15 199-20373 | | | | | |
| Compan Raven F | | rces, LL | .c | | | | | Lea Fin | ase nley | | | | | #1-27 | Well Nu | ımber | |
| County Wallace | Coun | ty | Loca NE4 S | | | Section 27 | | | | TWP RNG (E/W) 11S 42W | | | | | Acres / | Attributed | |
| Field | | | | | • | Reservoi Niobran | | • | | | Gas Gathering Connection | | | | | | |
| Completi 8/2008 | ion Date | 0 | | | _ | Plug Bac 1242.77 | k Total De | epth | | | Packer S | Set at | | Rec | | | |
| Casing S 4 1/2" | Size | | Welg 10.5 | | | | Internal Diameter Set at 1285.5' | | | | | Perforations 1030' - 1057' | | | NOW SETVE | | |
| Tubing S 2 3/8" | Size | | Welg | | | Internal I | Diameter | <u> </u> | Set a | it | | rations | KCC01 2011 | | | | |
| Type Cor | • | n (Descr | | | | Type Flui | d Product | tion | 1020 | J. 10 | | nit or Traveling | rsystem (West Kansas Pipeline) ACCOVATION TO VER AND ACCOVATION TO Plunger? YES AND ACCOVATION Gas Gravity - G. | | | | |
| CO2 Fr Producin | | (Annulu | s / Tubl | ng) | | % C | arbon Dic | oxide | | . | No % Nitrog | en | | Gas Gr | avity - |] | |
| Tubing Vertical 0 1300' | Depth(H | 1) | | | | | Pro | essure Ta | aps | | | | | (Meter F | Run) (P | rover) Size | |
| Pressure | Buildup | p: Shu | 9/2 | 27 | 2 | 0 11 at 1 | 0 am | (AM) | (PM) | Taken_9/ | 27 | 20 | 16 at | | | (AM) (PM) | |
| Well on L | _ine: | Star | ted <u>9/</u> 2 | 27 | 2 | 0 16 at 1 | 0 am | _ (AM) | (PM) | Taken 9/ | 28 | 20 | ai | 10 am | (| (AM) (PM) | |
| | | | | | | | OBSER | VED SUF | RFACE | DATA | | | Duratio | on of Shut-i | in_24 | Hours | |
| Static / Orifice Dynamic Size Property (Inches) | | 9 Pro | Circle one: Pressure Meter Differential Prover Pressure psig (Pm) Inches H ₂ 0 | | Flowing Temperature t | Temperature Temperature | | | ng Pressure) or (P _c) psia | | | Duration (Hours) | | Liquid Produced (Barrels) | | | |
| Shut-In | Shut-In .500° | | 4.5 | 0 | | | 8 | | ig | рена | 8 | | 24 | 24 | | 0 | |
| Flow | .500 | " 1 | 15 4 | | | | 5 | 5 | | 5 | | 24 | | 0 | | | |
| | | | | | | | FLOW S | TREAM | ATTRI | BUTES | | | | | | · | |
| Plate Coefficient (F _b) (F _p) Mcfd | | Mete Prover F | Circle one: Meter or Prover Pressure psia Prover Pressure | | Extension | Fac | Gravity Factor F _g | | ng ature or | Deviation Factor F _{pv} | | Metered Flow R (Mcfd) | , | GOR (Cubic Feet/ Barrel) | | Flowing Fluid Gravity G _m | |
| | | | | | | | | | | | | | | | - | | |
| (P₀)² ≃ | | _: | (P _w) ² | <u> </u> | : | (OPEN FL | | IVERAB | - | CALCUL - 14.4) + | | : | | (P _a)² (P _d)² | 2 = 0.2 2 = | 07 | |
| (P _o) ² - (or (P _o) ² - (| _ | (P _c) ² - | (P _*)² | 1 | se formula 1 or 2: Pa - Pa Pa - Pa Pa - Pa Ad by: Pa - Pa | LOG of formula 1, or 2, and divide | P ₀ ² . P _w ² | | Slop Ass | ssure Curve e = "n" or signed ard Slope | n x i | .og [] | A | ntilog | Del Equals | en Flow iverability R x Antilog (Mcfd) | |
| Open Flo | w | | | | Mcfd @ 14. | 65 psia | | Deli | verabi | lity | | | Mcfd @ | 14.65 psia | a. | | |
| | • | • | - | | | Company, s | | | • | 7/ | o make th | e above repo | , | | s know | tedge of | |
| | | | Witness | (If any) |) | | | • | _ | 1000 | <u>-~{</u> | For C | опралу | | · | <u> </u> | |
| | | | For Com | nission | 1 | | | | _ | | | Chec | ked by | | - | | |

| | der penalty of perjury under the laws of the state of Kansas that I am authorized to request der Rule K.A.R. 82-3-304 on behalf of the operator Raven Resources, LLC |
|-------------------|--|
| and that the fore | going pressure information and statements contained on this application form are true and |
| | st of my knowledge and belief based upon available production summaries and lease records |
| | tallation and/or upon type of completion or upon use being made of the gas well herein named. uest a one-year exemption from open flow testing for the Finley 1-27 |
| | rounds that said well: |
| (Ched | k 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 agr | ee to supply to the best of my ability any and all supporting documents deemed by Commissio |
| staff as necessa | ry to corroborate this claim for exemption from testing. |
| Date: <u>(0/)</u> | RECEIVED NOV U 4 2011 KCC WICHITA |
| | Signature: Ag. Member |
| | <u> </u> |

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.

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Form G-2 (Rev. 7/03)

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Typo Tost | : | | | | (· | See instr | ucn | ons on Hevi | 9159 \$108, | , | | | | | |
|--|-------------------------------|--|----------------|-------------------------------|--|--|-------------|---|------------------------|---|------------------|---------------------------|--|-------------------------------|--|
| = : | cn Flow Test Date: API No. 15 | | | | | | | | | | | | | | |
| Deliverability | | | | | | | | | | | | | | | |
| Company | | | | | | | • | Lease | | | | 1 | Well No | ımber | |
| County | | Loca | tion | | Section | <u> </u> | 'n | TWP | | RNG (E/ | W) | | <u></u> | Attributed | |
| | | | | | | | | | | Con Carl | narina Const | | | | |
| Feld | | | | | Reservoi | r | | | | Gas Gati | nering Conne | Gaon | | | |
| Completic | on Date | | | | Plug Bec | k Total D | epti | h | | Packer S | et at | | | | |
| asing S | ize | Wei | ht | | Internal D | Diameter | ••• | Set at | | Perfor | ations | То | | RECO | |
| ubing Si | 20 | Wei | ht | | internal C | Diameter | | Set at | | Perto | ations | То | AL | RECEN W 04 21 WCH- | |
| ype Con | npletion (| (Describo) | | | Type Flui | d Produc | tion | I | | Pump Un | it or Traveling | Plunger? | Ch ^{No} , | . 42 | |
| roducing | Thru (A | Annulus / Tub | ing) | | % C | arbon Di | oxic | de | | % Nitrogo | en . | Gas C | Gravity | CHI | |
| ertical D | epth(H) | | | <u>.</u> | · | Pi | ress | sure Taps | | | · | (Meter Run) (Prover) Size | | | |
| | | | - e e | | | | | | | 1/20 | | | | | |
| reasure | Bulldup: | | | 2 | | | | | | 1/2 B | | // at //21 | | (AM) (PM) | |
| eli on L | ine: | Started _7 | /27 | 20 | 0 /11 at /(| 0100 | | (AM) (PM) | Taken | 1/28 | 20 | 11 at 101 | | (AM) (PM) | |
| | | | | | | OBSER | VEI | D SURFACE | DATA | | | Duration of Shu | d-in 2 | Hours | |
| Static / | Orifice | IZB Prover Press | | Prossure Oilforential | Flowing Well Head | | | (P _w) or (P _t) or (P _e) | | Tubing Wellhead Pressure (P_) or (P _i) or (P _i) | | Ouration | Liqu | Liquid Produced (Barrels) | |
| roparty | Size (inches | | | in Inches H ₂ 0 | Temperature t | | | | | | | (Hours) | | | |
| Shut-In | | haift (Let | " — | anama ryu | | | | 8 | psia | psiq_ | psia | 24 | | 0 | |
| Flow | | | | | | <u> </u> | | 5 | | 2 | 1 | 24 | | 0 | |
| | | | | | L | FLOW S | TRI | EAM ATTRI | BUTES | | <u> </u> | | | | |
| Plate | | Circle one: | Τ | Press | Grav | | • | Flowing | 1 | lation | Metered Flow | GOI | ——— a | Flowing | |
| Coeffiect | | Mater or Prover Pressure | | Meter or Extension | | Factor | | emperature Fe | | ector R | | (Cubic Fee | | Fluid Gravity | |
| McId | e' | psia | _ | ✓ P _m xh | F. | • | | F _n | F _{pv} (McId) | | (MCIO) | Darre | ~, | G _m | |
| | | | | | | | | | <u> </u> | | <u></u> | | | | |
| | | _ | | | • | | | ERABILITY) | | | | |)² = 0.3 | | |
| <u>,), = </u> | | : (P)² | | : ose formula 1 or 2 | P _a = | | <u>_^</u> ^ | T | - 14.4) + | 14.4 = | : , , | (P | a)2 = | | |
| (P _q)3 · (F | | (P _a)*- (P _a)* | | 1. p.1.p.1 | LOG of formula | | | | sure Curve 9 = "N" | nxl | .og | Antilog | 1 | pen Flow liverability | |
| (P _e)a - (F | -)· | | | 2. P. 1. P. 1 | 1. or 2. and divide | 1. or 2. | | Assigned | | - " - 555 | | Anwog | Equal | Equals R x Antillog (Mcfd) | |
| | | | dis | ted by: P.* - P* | by: | <u> </u> | | Stands | rd Stope | - | | | + | - | |
| | | | - | | | | | | | - | | ···· | | | |
| | | | ـــــ | Mcfd @ 14. | 65 psla | | | Deliverabil | lity | | | Mctd © 14.65 p | sia | | |
| pen Flo | w | | | | | | | | | | | | | | |
| ``` | | ned authority. | on h | | Company | states tha | ıl he | e is duly eut | horized to | make th | e above repor | t and that he l | nas knov | viedge of | |
| Thou | undersign | | | ehalf of the | | | | | | | | t and that he i | | | |
| Thou | undersign | ned authority, rein, and that | | ehalf of the | | | | | | | | | | | |
| | undersign | | sald | ehalf of the | | | | | | | | | | | |

| | | he laws of the state of Kansas that I am authorized to request pehalf of the operator Resources LLC |
|-----------------|--------------------------------------|---|
| and that the | e foregoing pressure information a | and statements contained on this application form are true and |
| correct to th | ne best of my knowledge and belief | based upon available production summaries and lease records |
| | | ompletion or upon use being made of the gas well herein named. |
| I hereby | y request a one-year exemption from | m open flow testing for the Finley 1-27 |
| gas well on | the grounds that said well: | · |
| | | |
| í | (Check one) | |
| | is a coalbed methane produ | icer |
| | is cycled on plunger lift due | |
| | is a source of natural gas fo | or injection into an oil reservoir undergoing ER |
| | is on vacuum at the present | t time; KCC approval Docket No. |
| | is not capable of producing | g at a daily rate in excess of 250 mcf/D |
| مرماليس بالدار | | ability against all comparting decompate deemed by Commission |
| | | ability any and all supporting documents deemed by Commissio |
| stan as nec | cessary to corroborate this claim fo | r exemption from testing. |
| - 1 | ^ | RECEIVED NOV 0 4 2011 KCC WICHITA |
| Date: <u>9/</u> | 27 | "ECEIVER |
| | | NOV 04 |
| | | KCC 1 2011 |
| | | IND. WICHITA |
| | O'rea | |
| | Sign | Title: |
| | | Title: Kunfer |
| | | • |

Instructions:

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