KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:				((See Instruc	tions on Rev	verse Side)				
Or	oen Flo	w			Test Date	. ,			A DJ	No. 15		_	
√ De	eliverat	ilty			9/27/20					199-20368	-000	\mathcal{O}	
Company Raven F		rces	, LLC				Lease Gebhar	ds			1	We #1-35	il Number
County Wallace	Coun	ıty	Locati NE/4 S		Section 35		TWP 11S		RNG (E/ 42W	W)		Acı	res Attributed
Field					Reservoi Niobrari		12			hering Conn gathering s		Vest Kan	sas Pipeline)
Completic 8/2008	on Dai	te			Plug Bac 1187.46	k Total Dep	th		Packer S	et at			
Casing S 4 1/2"	ize		Welgh 10.5	ì	Internal I	Diameter	Set a 1229			rations - 901'		То	
Tubing S 2 3/8"	ize		Welgh 4.7	l	Internal [Diameter	Set a 861.		Perfo	rations		То	$\overline{}$
Type Con					Type Flui Only G	d Production	n		Pump Ur No	it or Traveling	Plunger?	Yes /	No)
Producing	g Thru	(An	nulus / Tubing)	% C	Carbon Dioxi	de		% Nitrog	en	(Gas Gravil	ty - G _o
Vertical D	Depth(H	H)			.	Pres	sure Taps					Meter Rur .500"	n) (Prover) Size
Pressure	Bulldu	iD:	Shut in9/27	7 2	0.11 at 1	0 am	(AM) (PM)	Taken 9/2	27	20	11 at 1	0 am	(AM)(PM)
Well on L			Started 9/27		o <u>11</u> at <u>1</u>			Taken <u>9/</u> 2			11 at _1		(AM)(PM)
						OBSERVE	D SURFACE	DATA			Duration o	of Shut-in_	24 Hours
Static / Dynamic Property	Orifi Siz (inch	0	Gircle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H _a 0	Flowing Temperature t	Well Head Temperature t	Casi Wellhead I (P _w) or (P	Pressure) or (P _c)	Wellhea (P _w) or	ubing ad Pressure (P ₁) or (P ₆)	Durati (Hour		Liquid Produced (Barrets)
Shut-In	.500)"	15.8	0	 		psig 9	psla	psig 9	psia	24	(0
Flow	.500)"	16.5	6			5		5		24	()
				·····	<u> </u>	FLOW STR	EAM ATTRI	BUTES					
Plate Coeffiec (F _b) (F Mctd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension Pmxh	Grav Fac F	tor	Flowing Temperature Factor F _{tt}	Fa	ation ctor	Metered Flov R (Mcfd)	RE	GOR Ed VEI Barrel)	Flowing Fluid Gravity G
											NOV	1 4 21	
(D)	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		(0.)3		-		ERABILITY)				KCC		A FFI
(P _e) ² =	1	<u>=</u> :	(P _w) ² =	Choose formula 1 or 2	P _d =			- 14.4) +	14.4 =	·		(P _d) ² =	
(P _e) ² - (I or (P _e) ² - (I	· 1	(F	P _a) ² - (P _a) ²	1. P _a ² - P _a ² 2. P _a ² - P _a ² (Midded by: P _a ² - P _a ²)	LOG of formula 1. or 2. and divide by:	p.2. p.2	Šlop Ass	ssure Curve ie = "n" or signed ard Slope	n×l	.og]	Antilo	99 E	Open Flow Deliverability quals R x Antilog (Mcfd)
Open Flo	 w			Mcfd @ 14.	65 psia		Deliverabi	lity			Mcfd @ 14	1.65 psia	
		igner	authority or	behalf of the	<u> </u>	tates that h	•		make th				nowledge of
				id report is true				IN IL	tay of	Nov	T and man	X	, 20 <u></u>
			Witness (if	any)	<u> </u>			X	14 M	1 V For C	company	4	
			For Commi	ssion			-			Char	ked by		

I declare under penalty of perjury under the laws of the exempt status under Rule K.A.R. 82-3-304 on behalf of the o	•
and that the foregoing pressure information and statement correct to the best of my knowledge and belief based upon a of equipment installation and/or upon type of completion or undereby request a one-year exemption from open flow to gas well on the grounds that said well:	ts contained on this application form are true and available production summaries and lease records upon use being made of the gas well herein named.
(Check one) is a coalbed methane producer is cycled on plunger lift due to water is a source of natural gas for injection int is on vacuum at the present time; KCC ap is not capable of producing at a daily rat	pproval Docket No
I further agree to supply to the best of my ability any an staff as necessary to corroborate this claim for exemption f	•
Date:	RECEIVED NOV 1 4 2011 KCC WICHITA
Signature: All Signature: Mana	aging 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

Type Tes	it:				(See Instruc	ctions on Re	verse Side	9)		10	V 0 4 2011 Mod Hopping
=	pen Flo				Test Date) :			API	No. 15	TCC	9 2010
	eliverat	onty			9/27/20	11		<u>.</u>	15-	199-20368		(C)
Company Raven F	•	rces	, LLC				Lease Gebhar	ds			#1-35	Well Manaber
County Wallace	Cour	ity	Locatio NE/4 SI		Section 35		TWP 11S	·	RNG (E/ 42W	W)		Acres Attributed
Field	-				Reservoi Niobran					nering Conn- gathering s		ansas Pipeline)
Completi 8/2008	on Da	te			Plug Bac 1187.46	k Total Dep o'	oth		Packer S	et at		
Casing S 4 1/2"	lize		Weight 10.5		Internal [Diameter	Set a 1229	it 9.53'		rations - 901'	То	
Tubing S 2 3/8"			Weight		Internal [Diameter	Set a 861.		Perfo	rations	То	
Type Cor CO2 Fr		n (De	escribe)		Type Flui	d Productio	n		Pump Un	it or Traveling	Plunger? Yes	/ No
Producing Tubing	g Thru	(Anı	nulus / Tubing)	% C	arbon Diox	ide		% Nitrog	en	Gas Gr	avity - G _g
Vertical D	Depth(}					Pres	ssure Taps				(Meter F .500"	Run) (Prover) Size
Pressure	Buildu	p:	Shut in9/27	, 2	0 11 at 1	0 am	. (AM) (PM)	Taken 9/	27	20	11 at 10 am	(AM) (PM)
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						OBSERVE	ED SURFACE	E DATA			Duration of Shut-i	in 24 Hours
Static / Oynamic Property	Orifi Siz (inch	0	Circle one: Mater Prover Pressur psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	(P _w) or (P	Pressure	Wellhea (P _w) or	ubing ad Pressure (P ₁) or (P _e)	Duration (Hours)	Liquid Produced (Barrels)
Shut-In	.500)"	15.8	0			psig 9	psia	9 9	psia	24	0
Flow	.500)"	16.5	6			5		5		24	0
			1		1	FLOW STE	REAM ATTR	BUTES				
Plate Coeffiec (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension P _m xh	Grav Fact F _c	or	Flowing Temperature Factor F _{fi}	Fa	lation ctor : pv	Metered Flov R (Mcfd)	GOR (Cubic Fee Barrel)	Flowing Fluid Gravity G
					(ODEN SI	2040 (DEL DI	(CDADULTY)		ATIONS			
(P _o) ² =		_:	(P _w) ² =_	:	-		/ERABILITY) % (P	' _e - 14.4) +		;	(P _a)² (P _d)²	! = 0.207 ! =
(P _a) ² - (I		(P	P _e) ² - (P _w) ²	1. P ₀ ² - P _a ² 2. P ₀ ² - P ₀ ² tivided by: P ₀ ² - P _a ²	LOG of formula 1. or 2.	P.2. P.2	Backpres Slop Ass	ssure Curve te = "n" or signed ard Slope	n x I	Г٦	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
Open Flo	w			Mcfd @ 14.	65 nsia		Dellverabi	ilitv			Mcfd @ 14.65 psi	<u> </u>
		ionar	l authority co			tatee that h		-	n make th		rt and that he has	
		-	n, and that sa	id report is true	•		-	15	day of)c	tober_	, 20
			Witness (if				_		-		company	<u> </u>
			For Commi	ssion						Chec	ked by	

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Raven Resources, LLC and that the foregoing pressure information and statements contained on this application form an correct to the best of my knowledge and belief based upon available production summaries and least of equipment installation and/or upon type of completion or upon use being made of the gas well here. I hereby request a one-year exemption from open flow testing for the Gebhards 1-35 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 staff as necessary to corroborate this claim for exemption from testing. RECENTAGE ACC WICHIT	to request
and that the foregoing pressure information and statements contained on this application form an correct to the best of my knowledge and belief based upon available production summaries and least of equipment installation and/or upon type of completion or upon use being made of the gas well here I hereby request a one-year exemption from open flow testing for the Gebhards 1-35 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	
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staff as necessary to corroborate this claim for exemption from testing. $ \frac{RECEN}{NOV_{0.4.5}} $ Date: $\frac{10/25/11}{NOV_{0.4.5}}$	Commissio
Date: 10/25/11 A'DV 04 5	
Date: 10/25/1/	*
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KCC 14.	Iss
VICHIT	' A
	4
Signature: Mg. Member	
Tille Ma Menelaes	
Title:	

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Form G-2 (Rev 7/03)

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	l;				1	See Instruct	ions on Re	verse Side)				
[] Op	en Flo	H			T 0-4-				ADI	No. 15			
De	liverab	ilty			Test Date 9/2 2				API	1 NO. 15			
Company			. n 	-	<u>' d. 6. </u>		Lease					Well Number	
					= "."	Gef	Marel	<u>s</u>				1-35 Acres Attribut	•nd
County			Locat	ion	Section	•	TWP		RNG (E	/W)		ACIES AUTOU	ieu
Field					Reservoir	r	·		Gas Ga	thering Conn	ection		
Completic	on Dat	0			Plug Bac	k Total Dept	lh		Packer :	Set at			
Casing S	ize		Weigh	nt	internal [Diameter	Set &	ıt	Perfo	orations	То		
Tubing S	lzo		Weigh	nt	Internal (Diameter	Set 8	ıt	Perfo	orations	То		
Type Cor	nptetio	n (De	escribe)		Type Flui	d Production	n	 -	Pump U	nit or Traveling	Plunger? Yes	/ No	
Producing	Thru	(Anı	iulus / Tubin	9)	% 0	Carbon Dioxi	də		% Nitrog	gen	Gas Gr	avity - G _g	
Vertical C	Pepth(H	1)				Pres	sure Taps			·	(Meter I	Run) (Prover)	Size
Pressure	Bulldu	p: :	Shut in	1/24 2	0 <u>/ L</u> at _/	10100	(AM) (PM)	Taken	רג/פ	20		20_ (AM) (F	——- РМ)
Well on L	ine:										11 at _/0.4		
					·· . · · · · · · · · · · · · · · · · ·	OBSERVE	D SURFAC	E DATA	,		Duration of Shut-	<u> ۲۷ م</u>	.Hours
Static / Oynamic Property	Orifi Siz (Inch	8	Circle one Mater Prover Press		Flowing Temperature 1	Well Hoad Temperature	Cas Wellhead (P _w) or (P	Pressure	Wellhe	Tubing ead Pressure or (P _t) or (P _c)	Ouration (Hours)	Liquid Produ (Barrole)	
Shut-In			palg (Pm)	Inches H ₂ 0	·		Paig G	рега	ряі <u>в</u> 9	psia	24	0	
Flow							5		5		24	0	
						FLOW STR	EAM ATTR	BUTES					
Plate Coeffice (F _b) (F Mote	ient ,)	Pro	Circle one. Meter or ver Pressure psia	Press Extension	Grav Fact	ior 1	Flowing famperature Factor F _{II}	Fa	ation	Matared Flor R (Mcfd)	(Cubic tal	Gra	wing uid svity 3 _m
										A	100	2011	
L					(OPEN FL)	OW) (DELIV	FRARILITY	CALCUL	ATIONS		Wigh		
(P _e)2 =		_;	(P_)3 =	:	Pa=	9, (522	'	- 14.4) +		:	C Wigg	0.207	_
(P ₆) ² · (I or (P _e) ² · (I	- I	(P	_)*- (P_)*	Choose formula 1 or 2 1. P.2 - P.2 2. P.2 - P.2 childed by: P.2 - P.3	LOG of formula 1, or 2. and divide	P.*-P.*	Backpro: Slop	ssure Curve be = "rf" of		roe	Antilog	Open Flor Dollverabil Equals R x A (Mofd)	lity Intilog
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Open Flo				Mcfd @ 14.	·		Deliverab				Mc1d @ 14.65 psi	-	
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			Witness (i any)			-			Far	оптрапу		
		-	For Como	ndsalon			-			Cher	ited by		

Form G-2

			ansas that I am authorized to request
			on this application form are true and
	-		oduction summaries and lease records
	•	· · · · · · · · · · · · · · · · · · ·	ing made of the gas well herein named.
			Gaphards 1-35
	grounds that said well:	an ion open now teams ior the	Supplied Sup
945 11611	grounds that sale won.		
(Che	eck one)		
	Is a coalbed methane	producer	
Ī	is cycled on plunger li	ift due to water	
Ē	is a source of natural e	gas for injection into an oil rese	ervoir undergoing ER
Ē	is on vacuum at the pr	resent time; KCC approval Doc	ket No
Ī	is not capable of prod	lucing at a daily rate in excess	of 250 mcf/D
I further ag	ree to supply to the best o	of my ability any and all suppor	rting documents deemed by Commission
staff as necess	ary to corroborate this cla	aim for exemption from testing.	•
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Date: <u> </u>			MECEN
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		11/2	RECEIVED NOV 0 4 2011 KCC WICHITA
		Signature:	
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