KCC WICHITA

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(-	See Instruc	tions on He	verse Siae	יי		•			
= '	en Flow				Test 'Date):				No. 15		$\overline{}$		
De	liverabil	ty			11/17/1	1			007	7-22832 ~	<u>- 000</u>	<u> </u>		
Company		2				· · · · · · · · · · · · · · · · · · ·	Lease FARLE	ΞΥ			7	Well Nu	mber	
County BARBER			Location NE NE SW		Section 32		TWP 34S		RNG (E/W) 14W			Acres Attributed N/A		
Field AETNA	\				Reservoir MISSIS					ering Conne	ection			
Completic 8/27/20)			Plug Bac 4809'	k Total Dep	th		Packer Se	et at				
Casing Size 4.5			Weigh 10.5#		Internal Diameter		Set at 4899		Perforations 4750		то 477 6	то 477 6		
Tubing Size 2 3/8			Weigh		Internal Diameter		Set at 4727		Perforations		То			
Type Con					Type Flui	d Productio		***************************************	Pump Uni	t or Traveling	Plunger? Yes	/ No NO		
			lus / Tubin	g)	% C	arbon Dioxi	ide		% Nitroge	n		ravity - (3,	
Tubing		···			0.260				4.840		0.634			
Vertical D	Pepth(H))					sure Taps NGE				(Meter 2'	Run) (P	rover) Size -	
Pressure	Buildup	: St	nut in11/	16 2	11 at 1			Taken_11	1/17	20	11 at 10:00	am	(AM) (PM)	
Well on L	.ine:				0 at		(AM) (PM)	Taken		20	at		(AM) (PM)	
			-	^		OBSERVE	D SURFAC	E DATA			Duration of Shut	-in _24	Hours	
Static / Dynamic Property	Orific Size (inche	P	Circle one: Meter rover Pressi	I	Flowing Temperature	Well Head Temperature	Wellhead	Pressure	Wellhea	ubing d Pressure (P _t) or (P _c)	Duration (Hours)		Liquid Produced (Barrels)	
Shut-In	(1110110	5,	psig (Pm)	Inches H ₂ 0		<u> </u>	psig 190	psia 204	psig 10	psia 24	24	 		
Flow					· · · · · ·									
		!				FLOW STE	REAM ATTE	IBUTES						
Plate Coeffiec (F _b) (F Mcfd	ient p)	M Prove	rcle one: leter or er Pressure psia	Press Extension √ P _m x h	Grav Fac F _e	tor	Flowing Temperature Factor F ₁₁	perature Factor R (Cu actor F (Mcfrl)		GOR (Cubic Fo Barrel	Feet/ Fluid			
													<u> </u>	
(P _c) ² =			(P _w) ² =	. :	(OPEN FL	. ,	ERABILITY	<mark>') CALCUL</mark> P _e - 14.4) +		:	(P _a) ² = 0.2	:07	
(P _c) ² - (l	P _a) ²	(P _c)	²- (P _w)²	Choose formula 1 or 2 1. P _c ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _w	LOG of formula 1. or 2. and divide		Backpre Sid	essure Curve pe = "n" - or ssigned dard Slope	nxl	og [Antilog	Del Equals	pen Flow liverability s R x Antilog (Mcfd)	
		··			,									
Open Flo				Mcfd @ 14	.65 psia	<u></u>	Deliveral	oility			Mcfd @ 14.65 ps	sia .		
		gned	authority, o	n behalf of the	Company,	states that h	he is duly a	uthorized t	o make th	e above repo	rt and that he h	as know	ledge of	
		-	-	aid report is tru						ecember // /			20 11	
					<u> </u>				bett	19lex	<u> </u>	<i></i>		
• • • • • • • • • • • • • • • • • • • •		-	Witness ((if any)						FOIC	company	KE	CEIVE	
			For Comr	nission	· · · · · · · · · · · · · · · · · · ·	·				Chec	ked by	DEC	05 20	

	eclare 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 BEREXCO LLC
and tha correct of equip	that the foregoing pressure information and statements contained on this application form are true and to the best of my knowledge and belief based upon available production summaries and lease records oment installation and/or upon type of completion or upon use being made of the gas well herein named. The production of 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 rther 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>C</u>	Dec 1, 2011 M \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	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.

RECEIVED
DEC 0 5 2011

KCC WICHITA