KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test: (See In:					See Instruct	ions on Re	verse Side)	1						
✓ Open Flow				Test Date				ADI	No. 15					
Deliverabilty				09/25/20	-	API No. 15 15-095-21720 — ()()()								
Company Atlas Operating LLC							Lease MORR	RIS-WOL	F-KEIN	/IIG	4	Well Nu	mber	
County KINGMAN			Location C-SE-SW		Section 35				RNG (E/	W)	Acres Attributed		Attributed	
Fleld SPIVEY GRABS				Reservoir MISSIS		<u> </u>		Gas Gathering Conne- ONEOK		ection		. <u>-</u>		
Completion Date 05/08/97				Plug Back 4506	Total Dept	h		Packer S	Set at					
Casing Size 5 1/2			Weight 15.5		Internal Diameter 5		Set at 4575		Perforations 4401		To 4424			
Tubing Size 2 3/8		·	Weight 4.7		Internal Diameter 2		Set at 4432		Perforations		То			
Type Completion (De CASING			scribe)		Type Fluid Production OIL & WATER				Pump Unit or Traveling P PUMP UNIT					
Producing Thru (Annulus / Tubing) ANNULUS				% C	arbon Dloxi	de		% Nitrog	jen	Gas Gravity - G _s .697				
Vertical Depth(H) 4401						Pres PIPE	sure Taps				(Meter Run) (Prover) Size 2			
Pressure	Bulldu	o: :	Shut in 09/2	5 20	11 at 10	0:15am	(AM) (PM)	Taken_09	/26	20	11 at 10:	15am	(AM) (PM)	
Well on L	ine:		Started	20) at		(AM) (PM)	Taken		20	at		(AM) (PM)	
						OBSERVE	D SURFAC	E DATA			Duration of S	hut-in 24	Hours	
Static / Dynamic Property	ynamic Size		Gircle one: Pressure Meter Differential Prover Pressure in paig (Pm) Inches H ₂ 0		Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P _i) or (P _o) psig psia		Tubing Wellhead Pressure (P_w) or (P_t) or (P_c) psig pala		Duration L (Hours)		ld Produced Barrels)	
Shut-In			_				28	p. 14	poig	pula				
Flow						EL OWLSTE	REAM ATTE	DIRITES						
	İ		Circle one:			FLOW SIF		11BUTES		<u> </u>	<u> </u>		Slavina	
Plate Coefflecient (F _b) (F _g) Mcfd		Pro	Meter or over Pressure psia	Press Extension Pmxh	Gravity Factor F		Flowing Temperature Factor F ₁₁	Fa	iation ctor : pv	R (Cubic		SOR ic Feet/ arrel)	Flowing Fluid Gravity G _m	
								7 6 5 1 5 1 11			ļ			
(D.)			(D.)		•		/ERABILITY	•				$(P_n)^2 = 0.3$	207	
$(P_e)^2 = $ $(P_e)^2 - (P_e)^2 - ($	P _a) ² (P _c) ² - (P _w) ²	hoose formula 1 or 2: 1. P _c ² - P _e ² 2. P _c ² - P _d ² Midded by: P _c ² - P _c ²	LOG of formula 1. or 2. and divide	P ₂ 2. P ₂ 2	% (P _e - 14.4) Backpressure Curv Slope = "n" Assigned Standard Slope				Antilog	De	Open Flow Deliverability Equals R x Antilog	
				inded by. To Tw								K	ECEIVED	
												NU	V 3 0 201	
Open Flo	w		**	Mcfd @ 14.	65 psia		Deliveral	bllity			Mcfd @ 14.6	5 PKCC	WICHIT	
		-	d authority, on				. 4	CIL		he above repo	ort and that h		viedge of	
the facts s	stated t	nere	in, and that sai		and correc	Executed	tnis the _	Ma	day of _	orica	A	ust		
			Witness (if			· · ·		<u>, (</u>			Company	·		
			For Commit	SSION						Che	cked by			

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 Atlas Operating 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 the MORRIS-WOLF-KEIMIG #4 gas well on the grounds that said well:
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:
Signature: hammuca Austronia Regulatory Coordinator

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.