

15-077-21731-0000

KANSAS CORPORATION COMMISSION
ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test:

(See Instructions on Reverse Side)

Open Flow
Deliverability

Test Date:
11/11/2011

API No. 15
077-21731-00-00

Company
Atlas Operating LLC

Lease
B. A. Smith

Well Number
6-8

County Location
Harper E2,SW,SE,NE

Section
8

TWP
31S

RNG (E/W)
8W

Acres Attributed

Field
Spivey Grabs-Basil

Reservoir
Mississippi

Gas Gathering Connection
Pioneer

Completion Date
03/01/2011

Plug Back Total Depth
4504

Packer Set at

Casing Size Weight
4 1/2 10.5

Internal Diameter Set at
4.052 4540

Perforations To
4404 4407

Tubing Size Weight
2 3/8 4.7

Internal Diameter Set at
1.995 4425

Perforations To

Type Completion (Describe)
Casing

Type Fluid Production
OIL & WATER

Pump Unit or Traveling Plunger? Yes / No
Yes-Pump

Producing Thru (Annulus / Tubing)
ANNULUS

% Carbon Dioxide
0.1682

% Nitrogen
2.4205

Gas Gravity - G_g
0.750

Vertical Depth(H)

Pressure Taps

(Meter Run) (Prover) Size

Pressure Buildup: Shut in 11/11 20 11 at 10:00am (AM) (PM) Taken 11/12 20 11 at 10:00am (AM) (PM)

Well on Line: Started 20 at (AM) (PM) Taken 20 at (AM) (PM)

OBSERVED SURFACE DATA

Duration of Shut-in Hours

Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter or Prover Pressure psig (Pm)	Pressure Differential in Inches H ₂ O	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)
						psig	psia	psig	psia		
Shut-In						220		100			
Flow											

FLOW STREAM ATTRIBUTES

Plate Coefficient (F _o) (F _p) Mcfd	Circle one: Meter or Prover Pressure psia	Press Extension $\sqrt{P_m \times h}$	Gravity Factor F _g	Flowing Temperature Factor F _t	Deviation Factor F _{pv}	Metered Flow R (Mcfd)	GOR (Cubic Feet/ Barrel)	Flowing Fluid Gravity G _m

(OPEN FLOW) (DELIVERABILITY) CALCULATIONS

(P_e)² = : (P_w)² = : P_d = % (P_c - 14.4) + 14.4 = : (P_e)² = 0.207
(P_d)² =

(P _e) ² - (P _d) ² or (P _e) ² - (P _w) ²	(P _e) ² - (P _w) ²	Choose formula 1 or 2: 1. P _e ² - P _d ² 2. P _e ² - P _w ² divided by: P _e ² - P _w ²	LOG of formula 1, or 2, and divide by: P _e ² - P _w ²	Backpressure Curve Slope = "n" ----- or ----- Assigned Standard Slope	n x LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)

Open Flow Mcfd @ 14.65 psia Deliverability Mcfd @ 14.65 psia

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the 9th day of December, 20 11

Witness (if any)

For Commission

Pharmacia Austria
For Company

Checked by

RECEIVED

DEC 20 2011

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 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 B. A. Smith 6-8 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: 12/09/2011

Signature: Sharmonica Austin
Title: 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.