KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				6	See Instruct	tions on Rev	rerse Side)					
Open Flow				Test Date	,•			API	No. 15		_			
Deliverabilty					i. I	API No. 15 175-21213 — C					OC			
Company		C	· · · · · · · · · · · · · · · · · · ·	н			Lease HATFI	ELD					Vell Nur	nber
County SEWARD			Location C SW		Section 31		TWP 31S		RNG (E/W) 32W		Acres Attributed			ttributed
Field			<u>-</u>	Ŵ	Reservoir MORR					hering Conn ING GAS		EMS		
Completic 12/14/1		9			Plug Baci 5889	k Total Depi	th		Packer S NONE					
Casing Size 4.5			Weigh 10.5	l	Internal Diameter 4.052		Set at 5940		Perforations 5549		то 5556			
Tubing Size 2 3/8			Weigh 4.7		Internal Diameter 1.995		Set at 5520		Perforations NONE		То			·- ·-
Type Con			escribe)		Type Flui	d Production	n		Pump Ur PUMP	eit or Traveling	Plunger	?? Yes /	No	
Producing	•	(Ani	nulus / Tubing	1)	% C	arbon Dioxi	lde		% Nitrog	en		Gas Gra	vity - G	0
Vertical D	Depth(H)			·•,	Pres FLA	sure Taps NGE				 -	(Meter R	un) (Pr	over) Size
_	Buildu	 p:	Shut In11/	18/ 2	0 11 at 8			Taken_11	/19/	20	11 at.	8 AM	(AM) (PM)
Well on L	.ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	·	(AM) (PM)
						OBSERVE	D SURFACE	E DATA			Duration	n of Shut-i	24	Hours
Static / Dynamic	Orific Size	0	Circle one: Meter Prover Pressu	Pressure Differential re in	Flowing Temperature t	Well Head Temperature t	Casi Wellhead (P _u) or (P	Pressure	Wellhe	Tubing ad Pressure (P ₁) or (P _c)	1	ration ours)		Produced Parrels)
Property Shut-In	(iiiciii		psig (Pm)	Inches H ₂ 0	`	<u> </u>	psig 18	psia	psig	psia	24			
Flow							10							
Li	1		!		l	FLOW STR	REAM ATTR	IBUTES	·					
Plate Coeffied (F _b) (F Mofd	eient	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m xh	Grav Fac F,	tor	Flowing Temperature Factor F ₁₁	Fa	fation ctor	Matered Flor R (McId)	w	GOR (Cubic Fee Barrel)	NV	Flowing Fluid Gravity G _m
<u> </u>			·		(OPEN FL	OW) (DELIV	/ERABILITY) CALCUL	ATIONS			(P /s	= 0.2	
(P _c) ² =		_;	(P _w) ² =	Choose formula 1 or 2	P ₆ =		% (F	- 14.4) +	14.4 =	 :	1	(P _a) ²		
(P _c) ² - (or (P _g) ² - ((F	P _c)² - (P _w)²	1. P _e ² - P _e ² 2. P _e ² - P _e ² divided by: P _e ² - P _e	LOG of formula 1, or 2, and divide	P.2 - P.2	Slop	ssure Curve be = "n" or	nx	roe	An	itilog	Deli Equals	en Flow verability R x Antilog McId)
Open Flo				Mcfd @ 14	.65 psia		Deliverab	ility			Mcfd @	14.65 psi	a	
		ione	d sutherity o	n behalf of the	Company	states that I	ne is duly a	uthorized t	o make ti	ne above rep	ort and t	hat he ha	s know	edge of
		-		aid report is tru						ECEMBER				20 .11
			Witness (f any)			-) <u> </u>	hett	1/1/2/Fo	Company	DE	~ ∈ n /	
			Fer Camm	rission			-	· · · · · · · · · · · · · · · · · · · 		Che	ecked by	ru <u>c</u> (∪CIV	
												DEC	09	2011

KCC WICHITA

	tre under penalty of perjury under the laws of the state of Kansas that I am authorized to request attus under Rule K.A.R. 82-3-304 on behalf of the operator BEREXCO LLC
and that the correct to the of equipment	the foregoing pressure information and statements contained on this application form are true and the best of my knowledge and belief based upon available production summaries and lease records ent installation and/or upon type of completion or upon use being made of the gas well herein named. By request a one-year exemption from open flow testing for the HATFIELD 1
	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
المراجعة الم	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 er agree to supply to the best of my ability any and all supporting documents deemed by Commission
	cessary to corroborate this claim for exemption from testing.
	Signature: Dreft My Title: PETROLEUM ENGINEER
	Title,

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.

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