## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:				(8	See Instructi	ions on Rev	erse Side	)						
<b>✓</b> Op	en Flow				Total Date				A CILI	Na 15		_			
Del	liverabilt	y			Test Date 10/18/11					40. 15 -20997 —	$\bigcirc$ (	OOC			
Company		:					Lease HITCH					1-25	Well Nu	mber	
,			Location S/2 SW/4		Section 25		TWP 32S		RNG (E/W) 34W		Acres Attributed				
Field HITCH	-				Reservoir U MOR					ering Conno					
Completic 4/4/198					Plug Back 5900	Total Dept	h		Packer S 5554	et at					
Casing Size 4.5			Weight 10.5		Internal Diameter 4.052		Set at 5916		Perforations 5650		то 5688				
Tubing Si 2 3/8"			Weight 4.7		Internal Diameter 1.995		Set at 5554		Perforations		То				
Type Con	•		scribe)		Type Fluid	d Production			Pump Un YES	it or Traveling	Plur				
Producing ANNUL	•	Ann	ulus / Tubing	)	% C	arbon Dioxid	de	•	% Nitroge	en		.741	ravity - C	•	
Vertical D	epth(H)						sure Taps							over) Size	
5669			<del> </del>			FLAI						3.068			
Pressure	Buildup			17/2						20				AM) (PM)	
Well on L	.ine:		Started	2	0 at		(AM) (PM)	Taken		20		. at	(	AM) (PM)	
	•					OBSERVE	D SURFACI	E DATA			Dura	ation of Shut	-in <u>24</u>	Hours	
Static /	Orilic	8	Circle one	Pressure	Flowing	Well Head	Cas Wellhead	•	1	ubing		Duration	Liquis	d Produced	
Dynamic	Size (inche		Meter Prover Pressu	Differential re in	Temperature t	Temperature t	(P <sub>w</sub> ) or (P		_			(Hours)		(Barrels)	
Property	(inche	3)	psig (Pm)	Inches H <sub>2</sub> 0			psig	psła	psig	psia	ļ				
Shut-In							10		ļ	ļ	24	4			
Flow									<u> </u>						
						FLOW STR	EAM ATTR	IBUTES	·····					,	
Piate	•		Circle one.	Press	Grav	vity _	Flowing	Dev	riation	Metered Flo	"	GOF	1	Flowing	
Coeffied		Pro	Meter or ver Pressure	Extension	Fac	tor	Factor	1	actor	R		(Cubic P		Fluid Gravity	
(F <sub>b</sub> ) (F			psia	√ P <sub>m</sub> ×h	F,	•	F,,	'	Fpv	(Mcfd)		Barre	·)	G <sub>m</sub>	
	l_				(OPEN FL	OW) (DELIV	ERABILITY	) CALCUL	ATIONS			(P	) <sup>2</sup> = 0.2	07	
(P <sub>c</sub> ) <sup>2</sup> =		:	(P <sub>w</sub> ) <sup>2</sup> =	:	P <sub>o</sub> =	• •		- <sup>2</sup> - 14.4) +		:			) <sup>2</sup> =	<u>.</u>	
		<u>-</u>		Choose formula 1 or 2	2:		Backpre	ssure Curve	,	г п			O	en Flow	
(P <sub>e</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup>		(F	(P_)²- (P_)²	1. P. 2 - P. 2	LOG of formula		Slope = "n"		n x LOG		Antilog		Dei	Deliverability	
(P <sub>a</sub> ) <sup>2</sup> - (	(P <sub>a</sub> ) <sup>2</sup>			2, P <sub>6</sub> - P <sub>6</sub> 2	1. or 2. and divide	P.2-P.2	As	signed				_		R x Antilog (Mcfd)	
				divided by: $P_c^2 - P_s$	,2 by:	<u>r, 1</u>	Stand	lard Slope	-		_		+	· · · · · · · · · · · · · · · · · · ·	
												<u> </u>			
Open Flo	ow			Mcfd @ 14	.65 psia		Deliverat	oility			Mcf	d @ 14.65 p	sia		
The	undersi	gne	d authority, or	n behalf of the	Company,	states that h	ne is duly a	uthorized	to make th	e above rep	ort a	nd that he l			
the facts	stated th	ere	in, and that sa	aid report is tru	e and correc	ct. Executed	this the 8	th	$   \text{day of } \underline{D} $	ecember			··	20 11 .	
			Witness (I	f any)		<del></del>			"DUM	- vyles	Compi	any	BEC	EIVED	
										U	_,		· VLO	-IAED	
			For Comm	rission						Chi	ocked I	Dy	DEC I	0 9 2011	

l decla	re under penalty of perjury under the laws of the state of Kansas that I am authorized to request
	tus under Rule K.A.R. 82-3-304 on behalf of the operator BEREXCO LLC
	e foregoing pressure information and statements contained on this application form are true and
	ne best of my knowledge and belief based upon available production summaries and lease records
	nt installation and/or upon type of completion or upon use being made of the gas well herein named.  y request a one-year exemption from open flow testing for the HITCH 1-25
	the grounds that said well:
,00 11011 011	g. Carrae max care mem
	(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 furthe	er agree to supply to the best of my ability any and all supporting documents deemed by Commission
staff as ne	cessary to corroborate this claim for exemption from testing.
Date: 12/8	J/11
	MuMo
	Signature: Beth Blego
	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.

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