KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	::				(See Instructi	ions on Rev	erse Side)						
✓ Op	en Flov	N			Took Doko				A DI I	No. 15					
De De	liverab	ilty			Test Date 10/11/11					No. 15 -21602 -	()	$(\Upsilon\Upsilon)$			
Company BEREDXO LLC					Lease GREWELL "A				1-17	Well Number 1-17					
County Location STEVENS C E/2 NE				Section 17		TWP 35S		PNG (E/W)			Acres Attributed		ttributed		
Field	- 		· -		Reservoir L MOR				Gas Gath	ering Conn K	ection				
Completion Date 4/21/1994				Plug Back 6696	Total Dept	h		Packer Set at NONE							
Casing S	ize		Weigh 10.5	t	Internal D 4.052	iameter	Set at 6741		Perfor 6388			To 6400			
Tubing Si	ize	_	Weigh 4.7	t	Internal E 1.995	iameter	Set at 6361		Perfor	ations		То			
Type Con			escribe)		Type Fluid	d Production			Pump Un	t or Traveling	Plun	ger? Yes	/ No		
	Thru		nulus / Tubing	9)	% C	arbon Dioxid	de		% Nitroge	en		Gas Gr	avity - G	· · · · · · · · · · · · · · · · · · ·	
Vertical D		1)				Press	sure Taps							over) Size	
Pressure	Buildu	D :	Shut in 10/	10/	11 at 8			Taken_10)/11/	20	11			—— —— AM) (PM)	
Well on L				2									(AM) (PM)	
					-	OBSERVE	D SURFACE	DATA			Dura	tion of Shut-	_{In _} 24	Hours	
Static / Dynamic Property	Dynamic Size		Circle one Meter Prover Pressu		Flowing Temperature t	Well Head Temperature t	Wellhaud Proc		Wellhea (P _w) or	Tubing ead Pressure or (P ₁) or (P _e)		Duration (Hours)	Liquid Produced (Barrels)		
Shut-In		-	psig (Pm)	Inches H ₂ 0			190	psia	psig 80	psia	24				
Flow	-														
						FLOW STR	EAM ATTRI	BUTES							
Plate Coeffiecient (F _b) (F _p) Mcfd		Pro	Circle one. Meter or over Pressure psia	Press Extension √ P _m x h	Fac	Gravity Factor F		Deviation Factor F _{pv}		Metered Flow R (McId)		GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m	
(P _c) ² =		:	(P)² =	:	(OPEN FL	• •	ERABILITY) % (P	CALCUL - 14.4) +		:		(P _a) (P _d)	² = 0.2	07 	
(P _c) ² -(P _a) ² or (P _c) ² -(P _d) ²		(F	P _c) ² - (P _w) ²	Choose formula 1 or 2 1. P _c ² - P _d ² 2. P _c ² - P _d ² divided by: P _c ² - P _d	LOG of formula 1, or 2. and divide	LOG of formula 1, or 2. and divide p 2. p 2		Backpressure Curve Slope = "n"		oe [Antiloo C		Open Flow Defiverability tals R x Antilog (McId)	
				11-11-6-11	OF poin	<u> </u>	Deliversh				Metel	@ 14.65 ps	ia .		
Open Flo				Mcfd @ 14	· · · · · · · · · · · · · · · · · · ·		Deliverab		a male 21					ladac af	
		-		n behalf of the						e above repo	ort an	a that he h		1eage of 20	
	•	•					_	18	helf	Men	~		a E	** <u>}_/p=+</u>	
			Witness (if any)			_		•	() For	Compan	y ī	_Ut	INFD	
			For Comr	nission			-			Chi	ecked by		ECC	9 2011	

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 BEREXCO 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
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 Commissic
staff as necessary to corroborate this claim for exemption from testing.
Date: _12/8/11
40 40 6
But Blue
Signature:
Title: PETROLEUM ENGINEER

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.

DEC 0 9 2011