KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruct	tions on Re	verse Side)						
□ Ор	en Fk	w			Tool Date				ADI	No. 15					
✓ Cellverabilty			Test Date August	30, 2011		API No. 15 15033213950000									
Company Castelli		lora	tion, Inc.				Lease Donna	Marie	-			#1-16	Well Nu	mber	
County Comanche		Location NE NW		Section 16			TWP 33S		RNG (E/W) 16W			Acres Attributed			
^{Field} Shimer		Si	E SW	sw	Reservoir Mississ				Gas Gas Oneol	thering Conn	ection				
Completio 3/09/04		te			Plug Bac 4986'	k Total Dept	th		Packer S	Set at				· · · · · · · · · · · · · · · · · · ·	
Casing Size 4 1/2"			Weight 10.5#			Internal Diameter 8rd		Set at 5017'		Perforations 4988-90 4953-66			То		
Tubing Size 2 3/8"			Weight			Diameter	Set 496		Perio	rations		То			
Type Con Single 2			escribe) s & Oil Per	forations	Type Flui Saltwa	d Production ter/Oil	n			nit or Traveling ing Unit	Plunge	r? Yes	/ No		
Producing Annulus	•	(Anı	nulus / Tubin	<u>a)</u>	% C	arbon Dioxí	ide		% Nitrog	ieu		Gas G	ravity - C	3,	
Vertical C		H)				Pres	sure Taps					(Meter	Run) (P	rover) Size	
Pressure	Buildi	ıp:	Shut in Au	gust 29	0 11 at 8	:00	(AM) (PM)	Taken_A	ugust 3	020	11 at	8:00	(AM) (PM)	
Well on L	.ine:			2											
						OBSERVE	D SURFAC	E DATA			Duratio	n of Shut	-in	Hour	
Static / Orific Dynamic Size Property (inche		ze	Circle one: Meter Prover Pressi psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)			Duration (Hours)		Liquid Produced (Barrels)	
Shut-In			P	monds 71 ₂ 0			790	804.4	psig	sig psla					
Flow															
						FLOW STR	REAM ATTR	RIBUTES							
Plate Coeffictient (F _b) (F _p) McId		Circle one: Mater or Prover Pressure psia		Press Extension Pmxh	Fac	Gravity Factor F _g		emperature Fa		lation Metered Flow actor R - py (McId)		W GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m	
					<u> </u>		 .							<u> </u>	
(P _c)² =		:	(P _w) ² =	:	(OPEN FL	OW) (DELIV		/) CALCUL P _e - 14.4) +		:		(P _a)) ² = 0.2) ² =	07	
$(P_a)^2 - (P_a)^2$ or $(P_a)^2 - (P_a)^2$		(P _o) ² - (P _w) ²		Choose formula 1 or 2 1. P _g ² - P _g ² 2. P _g ² - P _g ² divided by: P _g ² - P	LOG of formula 1. or 2. and divide	LOG of formula 1. or 2. and divide p2.p2		Backpressure Curve Slope = "n" Assigned Standard Slope		LOG	An	Ope ntilog Equals		en Flow iverability R x Antilog (McId)	
 													<u> </u>		
Open Flo	w			Mcfd @ 14.	65 psla		Deliveral	bility			Mcfd @	14.65 ps	la		
		•	•	n behalf of the	• •		,	2nd		ne above repo ecember	ort and t	hat he ha		ledge of 20 120 1	
			-					7		\bigcirc	Cu	<u> </u>	RE	CEIVE	
			Witness (f eny)				•	>	For	Company				
			For Comm	ission						Che	cked by		FEE	1 6 2	

ĺd	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exemp	t status under Rule K.A.R. 82-3-304 on behalf of the operator Castelli Exploration, Inc.
and th	at the foregoing pressure information and statements contained on this application form are true and
correc	t to the best of my knowledge and belief based upon available production summaries and lease records
	pment installation and/or upon type of completion or upon use being made of the gas well herein named.
lh	ereby request a one-year exemption from open flow testing for the
gas we	ell 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
l fu	urther agree to supply to the best of my ability any and all supporting documents deemed by Commissio
staff a	s necessary to corroborate this claim for exemption from testing.
Date: _	12/22/11
	Signature:
	Title: President

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.

FEB 1 6 2012

KCC WICHITA