KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	::				(See Instruc	tions on Re	verse Side)			
	en Flo				Test Date) :				No. 15		
De	liverab	HITY			10/24/1	1			15-	007-23364-0	00-00	
ompany VOOLS		PER	ATING CO	MPANY, LLC			Lease JAHAY				3	Well Number
County Location BARBER N2 NE NW				Section 6		TWP 34	P RNG (E/W) 10W		W)		Acres Attributed	
Field KOCHIA					Reservoir MISSISSIPPIAN			Gas Gathering Connection APC				
Completion Date				Plug Bac 5016	Plug Back Total Depth 5016				Set at	•		
asing Size Weight .500 10.500			Internal E 4.052	Diameter		Set at 5061		rations 6	то 4790			
Tubing Size Weig			Weigh 4.70	ht Internal D		Diameter Set at 4798			Perforations OPEN		То	
Type Completion (Describe) SINGLE				Type Flui	Type Fluid Production WATER				Pump Unit or Traveling Plunger? Yes / No PUMPING			
Producing Thru (Annulus / Tubing)					% Carbon Dioxide				en	Gas G	Gas Gravity - G	
ANNULUS Vertical Depth(H) 4781					Pressure Taps				(Meter Run) (Prover) Size			
essure	Buildu	p:	Shut in10/2	23/11 2	0 at		. (AM) (PM)	Taken_1()/24/11	20	at	(AM) (PM)
Well on Line:			Started	2	0 at	at		(AM) (PM) Taken		20	at	(AM) (PM)
			,		,	OBSERVE	ED SURFAC	E DATA			Duration of Shu	t-inHours
tatic / Orifice namlc Size operty (inches)		0	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H ₀ 0	Flowing Temperature t	Well Head Temperature t	ature (P _w) or (P _t) or (P _c		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _e)		Duration (Hours)	Liquid Produced (Barrels)
hut-In			porg (i iii)	menos vi ₂ o			psig 200	psia	160	psia	24	
Flow												
	•			 		FLOW ST	REAM ATTR	IBUTES	1			
Plate Coefficient (F _b) (F _p) Mcfd		Pro	Meter or Prover Pressure psia Press Extensio Pmx		Gravity Factor F _g		Flowing Temperature Factor F _{It} Overlat Formula Flowing Formula Flowing Formula Flowing Formula Flowing Formula Flowing Formula Flowing Flowi		ctor R		w GOR (Cubic F Barrel	eet/ Fluid
	_			<u> </u>	(OPEN FL	OW) (DELIV	/ERABILITY)2 = 0.207
$\frac{(P_c)^2 = {(P_c)^2 \cdot (P_a)^2}}{(P_c)^2 \cdot (P_d)^2}$			$(P_w)^2 = \frac{(P_w)^2 - (P_w)^2}{(P_w)^2 - (P_w)^2}$	Choose formula 1 or 2 1. P _c ² - P _s ² 2. P _s ² - P _s ²	LOG of formula 1, or 2.		Backpressu Stope		l n x	LOG	(P _d	Open Flow Deliverability Equals R x Antilog
(P _e) (- _a)-			divided by: Pc2 P	and divide by:	P.2. P.2		ssigned dard Slope		L J		(Mcfd)
pen Flo	w			Mcfd @ 14.	65 psia		Deliverat	bility			Mcfd @ 14.65 p	sia
		igne	d authority, or		•	states that		-	o make ti		i	as knowledge of
facts s	tated t	herei	in, and that sa	aid report is true	and correc	t. Execute	d this the 1	3/	day of N	OVEMBER W		RECEIVE
Witness (if any)							-	Wr	99 F. (Yalla	pany	DEC 3 0 20
			For Comm	nission			-			Cho	cked by	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~

I declare und	ler penalty of perjury under the laws of the state of Kansas that I am authorized to request
	der Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO., LLC
	going pressure information and statements contained on this application form are true and
correct to the bes	t of my knowledge and belief based upon available production summaries and lease records
of equipment insta	allation and/or upon type of completion or upon use being made of the gas well herein named.
I hereby requ	est a one-year exemption from open flow testing for the <u>JAHAY 3</u>
gas well on the gr	rounds that said well:
_	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 e to supply to the best of my ability any and all supporting documents deemed by Commission y to corroborate this claim for exemption from testing.
	Signature: Wm L Hallauge Title: FIELD MGR.

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.