KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:			(See Instruct	tions on Rev	erse Side,)					
•	en Flow			Test Date	3 :				No. 15				
De	liverabil	у		11/09/2	011			07: 07	5 21520-0	0-00			
Company Atlas Operating, LLC				_{Lease} Wyant & Sar			& Sande	•		Well Number 1			
County Location Harper NW-SW-SE			Section 4		TWP 31S		RNG (E/W) 8W		Acres Attributed				
Field Spivey-	-Grabs	s-Basil		Reservoir Mississ					hering Conn ER EXPLO	ection RATION, LLC.			
Completion 8-4-200	on Date		-	Plug Bac 4492'	k Total Dept	ih		Packer S	Set at				
Casing S 4.5"	ize	Weight 10.5		Internal [Diameter	Set at 4536		Perfo 442	rations O'	To 4448'			
Tubing S 2 3/8"	ize	Weigi 4.7#	ht	Internal [Diameter	Set at 4475		Perfo	rations	То			
	npletion	(Describe)		Type Flui Oil & V	d Production Vater			Pump Ur Pump	nit or Traveling Unit	Plunger? Yes	/ No		
Producing Thru (Annulus / Tubing) Annulus				% C	Carbon Dioxid	de		% Nitrog		Gas Gravity - G		ì	
Vertical Depth(H)				Pressure Taps PIPE						(Meter I	Run) (Pr	over) Size	
Pressure	Buildup	: Shut in	/09 20	0 11 at 1		(AM) (PM)	Taken 11	/10	20	11 _{at} 11:00a	ım (AM) (PM)	
Well on L	lne:	Started	. 20	0 at		(AM) (PM)	Taken	•	20	at	(.	AM) (PM)	
					OBSERVE	D SURFACE	DATA			Duration of Shut-	in 24	Hours	
Static / Orlfi Oynamic Size Property (inch-		Prover Press	1	Flowing Temperature t	Well Head Temperature t	re Wellhead Pressure (P _w) or (P _s) or (P _c)		Tubing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Duration (Hours)	,	Liquid Produced (Barrels)	
Shut-In		Paris (1)	mones vigo			psig 116	psła	psig	psia				
Flow				•.								 -	
				-	FLOW STR	EAM ATTRI	BUTES			·	'		
Plate Coeffice (F _b) (F	ient ,)	Circia one: Mater or Prover Pressure psia	Press Extension ✓ P _m xh	Grav Fac	tor T	Flowing Temperature Factor F _{rr}	Devia Fac F	tor ot	Metered Flov R (Mcfd)	w GOR (Cubic Fo Barrel)		Flowing Fluid Gravity G	
			 	1									
			<u> </u>	OPEN EL	OW) (DEL IV	EDARU ITV	CA1 CI II	i					
(P _c) ² =		; (P _w) ² :	= :	P _a =		ERABILITY) % (P _e	- 14.4) +		÷	(P _a) ⁽	2 = 0.20 2 =)7	
$(P_e)^2 - (P_a)^2$ or $(P_e)^2 - (P_a)^2$		(P _e) ² - (P _w) ²	Choose formula 1 or 2: 1. P _c ² - P _s ² 2. P _c ² - P _d ² divided by: P _c ² - P _s ²	LOG of formula 1. or 2. and divide	P.2. P.2	Backpressure Curve Slope = "n"		n x LOG		Antilog Delive		en Flow verability R x Antilog Mcfd)	
								-				<u> </u>	
Open Flo	w		Mcfd @ 14.	65 psia		Deliverabil	ity			Mcfd @ 14.65 psi	a		
The	undersiç	ned authority, o	on behalf of the	Company, s	states that h	e is duly aut			e above repo	rt and that he ha	s knowle	edge of	

the facts stated therein, and that said report is true and correct. Executed this the

day of Decembe

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Witness (if any)

For Commission

Checked by

DEC 27 2011

KCC WICHITA

	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
	status under Rule K.A.R. 82-3-304 on behalf of the operator Atlas Operating LLC
	at the foregoing pressure information and statements contained on this application form are true and
	to the best of my knowledge and belief based upon available production summaries and lease records
	oment installation and/or upon type of completion or upon use being made of the gas well herein named.
! he	ereby request a one-year exemption from open flow testing for the
gas we	ll 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	rther agree to supply to the best of my ability any and all supporting documents deemed by Commission
staff as	necessary to corroborate this claim for exemption from testing.
Date: _1	2/21/2011
	Signature: Pharmouica Austin
	Title: Regulatory Coordinator

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.