KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Re	verse Side	9)				
	en Flow			Test Date	e :			ΔOI	l No. 15			
De	liverabilty	24hr51	hutly	8/27/10				15-	033-21173	- 0000		
Company America	1					Lease Lake				#2	Well Number	
County Comanc	he	Locat C-NE-S	ion SE-SW	Section 14		TWP 32		RNG (E/W) 19W		Acres Attribute		ed Dec
Field Herd			Reservoi Mississ					thering Conn	ection			
Completion Date 02/13/01			Plug Bac 5932'	k Total Dep	th	1		Set at				
Casing Si 51/2	ize	Weigh 17.0	nt	Internal Diameter		Set at 5946'		Perforations 5162'		то 5260'		
Tubing Si. 23/8	Z Q	Weight 4.70		Internal Diameter 1.995		Set at 5300'		Perforations		То	- · · · · · · · · · · · · · · · · · · ·	
Type Completion (Describe) Gas				id Productio tion Wate		Pump Unit or Travel Pumping unit			Plunger? Yes	/ No		
Producing Annulus	•	nulus / Tubin	g)	% (Carbon Diox	ide	% Nitrogen		jen	Gas Gravity - G		
Vertical D	epth(H)				Pres	sure Taps				(Meter	Run) (Prover) S	Size
Pressure	Buildup:	Shut in 8/2	7 2	0_10_at_9	:15AM	(AM) (PM)	Taken 8/	28 20		10 _{at} 9:15A	M (AM) (PI	—— М)
Well on Li	ine:	Started 2				. (AM) (PM) Taken		20		at	(AM) (PM)	
			· -		OBSERVE	D SURFACE	DATA			Duration of Shut	-in_24	lours
Static / Orlfice Dynamic Size		Circle one: Meter Prover Pressu	Pressure Differential ure in	Flowing Temperature		Casing Welthead Pressure (P _w) or (P ₁) or (P _a)		Tubing Wellhead Pressure (P _n) or (P _n) or (P _n)		Duration (Hours)	Liquid Produced (Barrels)	
Property Shul-In	(inches)	psig (Pm)	Inches H ₂ 0	- t	t	psig 365	psia	psig	psia			_
Flow						40#				<u> </u>		
					FLOW STR	EAM ATTRI	BUTES	4				
Plate Coefficient (F _b) (F _p) Mcfd		Circle one: Meter or Press Extension polia Pmx		Gravity Factor F _o		Temperature F.		viation Metered Flor actor R F _{pv} (Mcfd)		w GOR (Cubic Fe Barrel)	eet/ Fluid	d ity
P _a)² =	:	(P _w)² =	·:	(OPEN FL		ERABILITY) % (P	CALCUL - 14.4) +		:) ² = 0.207) ² =	
$(P_{o})^{2} - (P_{a})^{2}$ (or $(P_{o})^{2} - (P_{d})^{2}$		(P _e) ² - (P _w) ² Choose formula 1 or 2: 1, P _e ² - P _e ² 2, P _e ² - P _e ² divided by: P _e ² - P _w ²		LOG of formuta 1, or 2, and divide p2, p2		Backpressure Curve Slope = "n" Or Assigned Standard Slope		n x LOG		Antilog	Open Flow Deliverabilit Equals R x An (Mcfd)	у
				ļ				_				
Open Flow	l v		Mcfd @ 14.	65 nsia	_	Deliverabi	lito			Motel @ 14 CC	<u></u>	
		d authority o		· · · · · · · · · · · · · · · · · · ·	istes that h		 -	meke th	• •	Mcfd @ 14.65 ps		
			aid report is true				•	_	ctober	n and that He fla	, ₂₀ 10	'
			· · · · · · · · · · · · · · · · · · ·				I	dy	5m	;HL	RECE	=: EIVE
	<u></u>	Witness (I				_	Roa	iec	Dur	отралу	OCT 2	9 2
		For Comm	RDS#LF1				J		Chec	cked by	KCC W	•
											NOC V	

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 Lake #2 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 mct/D I further 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: 10/26/10		nder penalty of perjury under the laws of the state of Kansas that I am authorized to request under Rule K.A.R. 82-3-304 on behalf of the operator American Warrior Inc.
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Signature: 17/h //		

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.

RECEIVED

OCT 2 9 2010