KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				· ·	(See Instruc	tions on Re	verse Side	a)			
Open Flow Deliverability				Test Date: 11-8&9,2010					01-F00	1279-00		
Company	,			<u>'</u>	11-8&9	9,2010	Lease		N/A	\ 		Well Number
	AN L.	LO	EB LLC	. ,	Section		TRICE	<u></u>	PNC /F	AAD.	#1	Acres Attalbuted
County Location BARBER CN/2 SW/4				9				RNG (E/W) Acres Attributed 13W				
Fleid MEDIC	INE L	.0[GE		Reservoi MISSIS	s SSIPPI			Gas Ga AMEF	thering Conne RICAN PIPI	ection ELINE COMP	PANY
•				Plug Bac 4719	Plug Back Total Depth 4719				Packer Set at NONE			
Casing Size 7.000			-	Weight 24.000		Internal Diameter 6.33		Set at 4640		orations O	To 4719	
Tubing Size Weight NONE				Internal I	Internal Diameter Set at			Perfo	rations	То	То	
Type Con SINGLE		(De	escribe)		• •	d Production	n		Pump U		Plunger? Yes	/ No
Producing Thru (Annulus / Tubing) CASING									jen	Gas Gr	Gas Gravity - G _g	
Vertical D)	····			Pres	sure Taps				(Meter	Run) (Prover) Size
4679			44	2.40			···-					
Pressure	Buildup											(AM) (PM)
Well on L	ine:	;	Started	2	20 at		(AM) (PM)	Taken		20	at	(AM) (PM)
			:	-,	,	OBSERVE	D SURFAC	E DATA	,		Duration of Shut-	in Hours
Static / Dynamic Property	ynamic Size		Gircle one: Meter Prover Pressu psig (Pm)	Pressure Differential re in Inches H _s 0	Flowing Temperature t	Well Head Temperature t	Casing Wellhead Pressure (P _w) or (P _t) or (P _e)		Tubing Wellhead Pressure $(P_w) \text{ or } (P_t) \text{ or } (P_0)$		Duration (Hours)	Liquid Produced (Barrels)
Shut-In		_	paig (r iii)	inches n ₂ 0			43	psla	psig	psia	24	1 •
Flow												
				,		FLOW STR	EAM ATTR	IBUTES				
Plate Coeffiect (F _b) (F	ient ,)	Circle one: Meter or Prover Pressure psia		Press Extension P_x h	Extension Fact		or Temperature		lation ctor	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	l Gravity I
			- , , ,				"					
				······································	(OPEN FL	OW) (DELIV	ERABILITY) CALCUL	ATIONS		(P)	²= 0.207
P_)2 =		:	(P _w)2 =	<u> </u>	P _d =		% (F	ੂ - 14.4) +	14.4 =	 :	(P.)	
(P _a)*- (F or (P _a)*- (F	2°);	(P	")*- (P_)*	1. Par Par 2. Par Par	LOG of formula 1, or 2, and divide	P.2. P.2	Slop	ssure Curve pe = "n" - or signed	n×	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
				#vided by: Par P	by:	<u></u>	Gialio	ard Slope				
Open Flow Mcfd @ 14.65 psia				,	Deliverability				Mcfd 9 14.65 psia			
				behalf of the						IOVEMBER	rt and that he ha	s knowledge of, 20 10
			Witness (II	any)			-	2	Je.	slie H.	Olkhar ompany	\triangle
			For Commi	ssion			_				ked by	RECEIV
										UNEC		

NOV 2 4 2010

I declare under penalty of perjury un exempt status under Rule K.A.R. 82-3-304 and that the foregoing pressure informat correct to the best of my knowledge and be of equipment installation and/or upon type I hereby request a one-year exemption	4 on behalf of the op tion and statements pelief based upon a pof completion or up	erator HERMAN L. LC s contained on this appropriate production sum con use being made of	DEB LLC. Dication form are to the second lease the gas well herein	true and records
nereby request a one-year exemptions as well on the grounds that said well:	on from open flow te ं।.	sung for the	,	
is on vacuum at the pro	ift due to water gas for injection into esent time; KCC ap ucing at a daily rate	_	 D	 commission
Date: 11-23-10		Seslie H. O		
	Title: REP.	HERMAN L. LOEB LI	_C	

Instructions:

1

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.



OFFICE TELEPHONE: (618) 943-2227



FAX: (618) 943-2220

November 23, 2010

Jim Hemmen
Kansas Corporation Commission
Conservation Division – Legal Department
Finney State Office Bldg
130 S Market Room 2078
Wichita KS 67202-3802

RE: Les Oldham's Signature Authority for KCC Forms

Mr. Hemmen:

The management/directors of Herman L. Loeb, LLC hereby notifies the Conservation Division of the Kansas Corporation Commission that Mr. Les Oldham, as agent for Herman L. Loeb LLC can affix his signature to any and all KCC forms having to do with Herman L. Loeb LLC's gas/oil operations in Kansas and said signature will have the same binding authority upon the company as if an employee of or an officer in the company signed the form.

This authorization will remain in effect until you are otherwise notified.

Sincerely,

HERMAN L. LOEB LLC

whe N. free!

Janette D. Loeb, Member/Manager

cc: Les Oldham

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