KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test			J		(5	See Instruc	tions on Re	verse Side)			
= `	en Flow liverabil				Test Date 11/7/10	:						
Company		ER	ATING COM	PANY, LLC			Lease McMOF	RAN	•	•	A-6	Well Number
County COMAN	County Location COMANCHE 205 FNL & 260 FEL			Section 18		TWP 35S	•	RNG (EA	V)		Acres Attributed	
Field YELLOV	VSTON	١E			Reservoir MISSISS					ering Conne	ection O SERVICES	
Completic 6/30/06	on Date	,			Plug Back 5850	Total Dep	th		Packer Se NONE	et at	<u>-</u> :	
Casing Si 4.500	z o	_	Weight 10.50		Internal Diameter 4.052		Set at 5850		Perforations 5322		то 5330	
Tubing Size 2.375			Weight 4,70		Internal Diameter 1.995		Set at 5804		Perforations OPEN		То	
Type Com		(De				d Production		<u> </u>		it or Traveling	Plunger? Yes	/ No
Producing Thru (Annulus / Tubing)				% Carbon Dioxide				% Nitrogen		Gas G	Gas Gravity - G	
Vertical D)				Pres	sure Taps				(Meter	Run) (Prover) Size
5326 Pressure	Buildun	r: !	Shut In	10	0 at		(AM) (PM)	Taken 11	1/7/10	20	at	(AM) (PM)
Well on L	•											(AM) (PM)
			• • • • • • • • • • • • • • • • • • • •			OBSERVE	D SURFAC	E DATA			Duration of Shut	-in Hours
Static / Dynamic Property	Orlflo Size (inche		Circle one: Meter Prover Pressure psig (Pm)	Pressure Differential in Inches H _a 0	Flowing Temperature t	Well Head Temperature t	rature $(P_+) \text{ or } (P_t) \text{ or } (P_t)$		Tubing Wellhead Pressure (P_u) or (P_t) or (P_o)		Duration (Hours)	Liquid Produced (Barrels)
Shut-In			pang (r m)	marios rigo			72	psia	psig 130	psia	24	
Flow												
			Circle one:		1	FLOW STE	Flowing	RIBUTES	T		İ	
Plate Coefflecient (F _b) (F _p) Mcfd		Pro	Meter or ever Pressure psia	eter or Extension		Gravity Factor F _g		Fa	iation ector - PY	Metered Flor R (Mcfd)	v GOR (Cubic Fo Barrel	eet/ Fluid
				· · · · · · · · · · · · · · · · · · ·	(0.05)				47000			
(P _c)² =		:	(P _w) ² =	:	P _d =	• •	/ERABILIT\ % (P _e - 14.4) +		:)² = 0.207)² =
(P _e) ² - (I or (P _e) ² - (I		(F	Cr.	1. P _c ² - P _c ² 2. P _c ² - P _c ² placed by: P _c ² - P _c ²	LOG of formula 1. or 2. and divide	P _c ² - P _w ²	Backpre Slo	essure Curve ppe = "n" - or ssigned dard Slope	n x l	.og []	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
<u>. </u>												
Open Flo	<u> </u>			Mcfd © 14.	65 psia		Delivera	bility			Mcfd @ 14.65 ps	sia
The	undersi	_	d authority, on in, and that said	behalf of the	Company, s		ne is duly a	uthorized t		e above repo	ort and that he h	
			uru mat odit				. 45 4.16			.0.	J.	RECEIVE
			Witness (if a	ny)						For	Company	DEC 2.8 2
			For Commiss	ion						Che	cked by	

	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt s	tatus under Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO., LLC
	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
	nent installation and/or upon type of completion or upon use being made of the gas well herein named. eby request a one-year exemption from open flow testing for the McMORAN A-6
	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 furt	her agree to supply to the best of my ability any and all supporting documents deemed by Commission
	necessary to corroborate this claim for exemption from testing.
stan as i	is desired to the state the state of the sta
	2/22/10
Doto: 12	
Date: 12	
Date: <u>12</u>	
Date: 12	Calum
Date: <u>12</u>	Signature:
Date: <u>12</u>	Signature:

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.