## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:			(	See Instru	ictions on Rev	verse Side	)			
Oр	en Flow			Test Date	٠.			ΔĐI	No. 15		
De!	liverabilty			10/4/10					007-22227-0	0000	
Company WOOLS		RATING CC	MPANY, LLC			Lease FALEN			•	₩1	/ell Number
County BARBER	₹ .	Locat 1315' F	ion SL & 675' FWL	Section 4		TWP 34S		RNG (E.	W)	А	cres Attributed
Field AETNA				Reservoi SNYDE		MISSISSIP	PI	Gas Gat APC	hering Conn	ection	
Completic 4/4/89	on Date			Plug Bac 4988	k Total De	pth		Packer S NONE	Set at		
Casing Size Weight 4.500 10.50			Internal I 4.052	Diameter		Set at 5067		rations 3	то 4967	· · · · · · · · · · · · · · · · · · ·	
Tubing Size Weight 2.375 4.70			Internal I	Diameter		Set at 4955		rations EN	То		
Type Completion (Describe) Commingled (Gas)			Type Flui	Type Fluid Production WATER				Pump Unit or Traveling Plunger? Yes / No PUMPING			
	The (A	nnulus / Tubin	<b>(9)</b>		Carbon Dio	xide		% Nitrog		Gas Gra	vity - G <sub>g</sub>
Vertical D 4550					Pre	essure Taps				(Meter R	un) (Prover) Size
Pressure	Buildup:	Shut in 10	/3/10 2			(AM) (PM)	Taken_10	)/4/10	20	at	(AM) (PM)
Well on L	ine:								20	at	(AM) (PM)
			1		OBSERV	ED SURFACI	E DATA	·		Duration of Shut-in	nHours
Static / Dynamic Property	Orifice Size (inches)	Circle one: Meter Prover Press	1	Flowing Temperature t	Well Head Temperatur	Wellhead	Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>6</sub> )		Tubing ad Pressure r (P <sub>t</sub> ) or (P <sub>e</sub> )	Duration (Hours)	Liquid Produced (Barrels)
Shut-In		psig (Pm)	Inches H <sub>2</sub> 0			psig 63	psia	psig 130	psia	24	
Flow											
		_!			FLOW ST	TREAM ATTR	IRLITES	<u></u> .			
Plate Coefflecient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or rover Pressure psia	Press Extension ✓ P <sub>m</sub> x h	xtension Fac		rity Flowing Temperature		iation ctor py	Metered Flow R (Mcfd)	y GOR (Cubic Fee Barrel)	Flowing Fluid Gravity G_m
P <sub>c</sub> )² =	:	(P <sub>w</sub> ) <sup>2</sup> =	=:	(OPEN FL		IVERABILITY _% (F	) CALCUL <sup>2</sup> 14.4) +		:	(P <sub>e</sub> ) <sup>2</sup> (P <sub>d</sub> ) <sup>2</sup>	= 0.207 =
(P <sub>o</sub> ) <sup>2</sup> · (F or (P <sub>o</sub> ) <sup>2</sup> · (F	- i	(P <sub>e</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Choose formula 1 or 2  1. P <sub>c</sub> <sup>2</sup> - P <sub>a</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> - P <sub>a</sub>	LOG of formula 1. or 2. and divide		Backpre- Slop	ssure Curve pe = "n" - or signed ard Siope	n x	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
			<u></u>								
Open Flo	<u></u>		Mcfd @ 14	.65 psia		Deliverab	oility			Mcfd @ 14.65 psia	<u> </u>
The	undersian	ed authority.	on behalf of the	Company.	states that	he is duly a	thorized t	o maka ti	ne above reno	rt and that he has	knowledge of
			aid report is tru						loveraber		, <sub>20</sub> <u>2010</u> .
								<u> </u>	سلار	とが	LRECEIVED
		Witness				_		(	<u></u>	Company	DEC 2 2 201
		For Com	mission						Che	cked by	KCC WICHI

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO., LLC 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 FALEN #1
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 mcf/D  I further agree to supply to the best of my ability any and all supporting documents deemed by Commiss
staff as necessary to corroborate this claim for exemption from testing.
Date: 11/29/10
Signature: Cal was

## 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.