KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:				(-	See Instruct	tions on Reve	erse Side,)					
Open Flow														
Deliverabilty					Test Date 9/30/201			API No. 15 189-22589-0000						
Company Devon E		Pro	duction Co	mpany, L.P.	Lease Rector							Well Number		
County Location Stevens				Section 11		TWP RNG (E/V 34S 38			W)	Acres Attributed				
Field Verna				Reservoir Morrow				Gas Gat APC	hering Conne	ection				
Completion Date 4/28/07				Plug Back 6470	k Total Depl	th		Packer S NA	Set at					
Casing S 5-1/2	ize		Weigh	t	Internal Diameter			Set at Pe 6723 62		rations 0	To 6216			
Tubing Si 2-7/8	Tubing Size Weight 2-7/8 6.5			t	Internal Diameter			Set at Perf 6190		rations	То			
Type Completion (Describe) Single				Type Flui	Type Fluid Production			Pump Unit or Traveling Plune			/ No			
Producing Thru (Annulus / Tubing) Tubing					% C	% Carbon Dioxide			% Nitrog	en	Gas Gravity - G			
Vertical D	epth(H)				Pres	sure Taps				(Meter F	Run) (Pr	over) Size	
6723														
Pressure Buildup: Shut in 9/30 20					0_10_at_9:	:00	(AM) (PM)	AM) (PM) Taken 10/1			10 at 9:00	(/	AM) (PM)	
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(/	AM) (PM)	
						OBSERVE	D SURFACE	DATA	,. <u>.</u>	.=	Duration of Shut-	in	Hours	
Static / Dynamic Property	ynamic Size		Circle one: Meter Prover Pressi		t t t		Wellhead Pressure		Tubing Weilhead Pressure $(P_{\bullet}) \propto (P_{\epsilon}) \propto (P_{\epsilon})$		Duration (Hours)	1 '	Liquid Produced (Barrels)	
Shut-In	(<u>-</u>		psig (Pm)	Inches H ₂ 0		<u> </u>	psig 235	psia	psig 60	psla	24	<u></u>		
Flow														
				,		FLOW STE	REAM ATTRI	BUTES				-		
Plate Coeffiecient (F _b) (F _p) Mcd		Circle one: Meter or Prover Pressure psia		Press Extension Pmxh	tension Fact		Flowing Temperature Factor F _{rt}	Deviation Factor F _{pv}		Metered Flov R (McId)	GOR (Cubic Feet/ Barret)		Flowing Fluid Gravity G_	
					-		ERABILITY)				-	= 0.20)7	
(P _c)² =	1	<u>-:</u>	(P _w) ² =	Choose formula 1 or 2	P _d =		1	- 14.4) +	14.4 = _	 : ₋ -	(P _d) ⁵	' =		
$(P_e)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _c)²- (P _w)²		1, P _e ² -P _a ² 2, P _e ² -P _a ² divided by: P _e ² -P _a ²	LOG of formula 1. or 2. and divide	formula 1. or 2. and divide p_2_p_2		Backpressure Curve Slope = "n"		roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)		
Open Flow			Mc/d @ 14.65 psia			Deliverability				Matel & 14 CE mail	<u> </u>			
					•						Mcfd @ 14.65 psi			
		_	•	n behalf of the aid report is true	, -				o make the day of <u>N</u>		rt and that he ha		edge of 10 <u>11 .</u> .	
	"		,=	F				_	Joni	alli	telom	RECF		
•			Witness (if any)			-			ForC	Company	IAD 4	P 2 044	
-			For Comn	nission						Chec	ked by	IAR I	4 2011	

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 Devon Energy Production Co., L.P. 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 Rector 11 #3	
gas well on the grounds that said well:	
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 Commissi staff as necessary to corroborate this claim for exemption from testing. Date: 3/10/11	on
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.

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