KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	!			(See Instruct	tions on Rev	rerse Side					
	en Flow liverabilt	y		Test Date 11-2&3				API N	lo. 15 ~ 00	7-02-3	562-00	
Company HERMA		-OEB				Lease MEE	· · · · ·		,	#1	Well Number	
County BARBER		Location C SE/4		Section 27		TWP 32S		RNG (E/M 13W	n		Acres Attribute	
Fleid M.L. BC	oggs			Reservoir MISSIS					oring Connect			
Completion Date 1-30-64			Plug Back Total Dept					Packer Se NONE	t at	1		
Casing Size 5.000			Weight 15.00		Internal Diameter 5.012		Set at 4564		Perforations 4462			
Tubing Size 2.375		Weigt 4.70	Weight 4.70		Internal Diameter 1.995		Set at 4494		Perforations OPEN		, , <u>,</u>	
Type Con SINGLE		(Describe)						Pump Unit or Traveling Plunger? Yes / No . PUMPING				
Producing ANNUL	•	Annulus / Tubin	g)		arbon Dioxi	de		% Nitroge		Gas G	ravity - G _g	
Vertical D					Pres	sure Taps				(Meter	Run) (Prover) (
4473 Pressure	Buildum	Shut in 11	-2-10 ₂	0 et		(AM) (PM)	Taken 11	-3-10	20	at	(AM) (P	
Well on Li	•											
					OBSERVE	D SURFACE	E DATA	•	Di	uration of Shut	-(n)	
Static / Dynamic Property	Orifice Size (inches	Meter Prover Press	Meter Differential Prover Pressure in		Flowing Well Head Temperature		Casing Wellhead Pressure (P _w) or (P ₁) or (P ₀) psig psia		Pressure	Ouration (Hours)	Liquid Produ (Barrets)	
Shut-In						85	P-1-12	psig	' '	24		
Flow												
			, <u>.</u>		FLOW STR	EAM ATTRI	BUTES	T				
Plate Coeffiect (F _b) (F McId	ent)	Circle one: Meter or Prover Pressure pala	Press Extension	Grav Fact F _a	tor 1	Flowing Temperature Factor F _{ft}	Fa	lation ctor	Metered Flow R (McId)	GOR (Cubic Fe Barrel	eet/ Flu	
				(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		<u> </u>		
(P _a) ² =		: (P_)² =	·:	P _d =		•	- 14.4) +		:	(P _a) (P _d)) ² = 0.207) ² =	
(P _a)*- (F or (P _a)*- (F	·)*	(P ₀)²- (P ₀)²	Choose formula 1 or 2 1. P _a ² - P _a ² 2. P _a ² - P _a ² divided by: P _a ² - P _a ²	LOG of formula 1, or 2, and divide	P2-P2	Slop	ssure Curve to = "n" or	n x LC	ke []	Antilog	Open Flow Deliverabili Equals R x Ar (McId)	
Open Flor	<u> </u>		Mcfd © 14.	65 psla		Deliverabi	ility			ofd @ 14.65 ps	ia	
			on behalf of the			4-						
		Wimes ((il may)			_		Ju	For Com	Ushan	RECE	
		For Corne	nission			_			Checker	d by	NEOL	

NOV 1 8 2010

	leclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request of status under Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L. LOEB 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									
	ell 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 fı	urther agree to supply to the best of my ability any and all supporting documents deemed by Commissic								
	s necessary to corroborate this claim for exemption from testing.								
,									
Jata.	11-17-10								
Jaio	· · · · · · · · · · · · · · · · · · · 								
	Signature: Seslie W. Olkhem								
	Title: REP. HERMAN L. LOEB LLC								

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.



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

mother free

Janette D. Loeb, Member/Manager

cc: Les Oldham

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