KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:				(See Ins	structions on Re	everse Side	»)				
☐ or	en Flov	v		Test Dat	۵۰			ADI	Ma 16			
Deliverability				11-2&3,2010				API No. 15 15-007-02-401-00-00				
Company HERM		LOEB				Lease LONK	ER			B-2	Well Number	
County Location BARBER C SW/4				Section 36		TWP 32S			W)		Acres Attributed	
Field M.L. B	OGGS	3		Reservo MISSI					rering Conn			
				Plug Bar 4490	Plug Back Total Depth				et at			
Casing Size Weight			Internal	Diamete	_		-	ations	То			
4.000 Tubing S			3.476	3.476 Internal Diameter		'9 at	4458 Perfor	ations	· 4470			
2.375 4.70			1.995	1.995 4480			OPE	N				
Type Completion (Describe) SINGLE				• • •	Type Fluid Production OIL,WATER				Pump Unit or Traveling Plunger? Yes / No PUMPING			
Producing ANNUL	•	(Annulus / Tub	ing)	% (Carbon I	Dioxide		% Nitroge	9រា	Gas G	ravity - G _o	
Vertical D	epth(H)	·			Pressure Taps			- 	(Meter	Run) (Prover) Size	
Pressure	Buildur	r Shut in 1	1-2-10	20 et		(AM) (PM)	Taken 11	1-3-10			(AM) (PM)	
Well on L											(AM) (PM)	
					******					u	(Allo) (1 M)	
Static /	Orific	Circle on	e: Pressure	, , ,	1	RVED SURFAC	E DATA sing	l n	ubìng	Duration of Shut	i-in Hours	
Dynamic Property	Siza (incha	Prover Pros	ssure in	Temperature	Well H Temperi	Wellhead	Wollhand Dragging		id Pressure (P ₁) or (P ₄)	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	····	psig (Pr	n) Inches H,	, ,	-	psig	psia	psig	psia			
Flow					 	40	 		-	24		
		_!	<u> </u>		FLOW	STREAM ATTE	BRUTES			<u></u>		
Plate		Circle one:	Press	Gra		Flowing		ation	Metered Flor	w GOR	Flowing	
Coeffiectent (F _p) (F _p)		Meter or Prover Pressure		P_xh Fac		Temperature Factor	Fa	ctor	R	(Cubic Fee	et/ Fluid Gravity	
McId		psla 		,		F,,	<u> </u>	pv	(McId)	Barret	, G.	
_	1			(005) 5	OHD (B)				<u> </u>			
P.)* =		_: (P _w) ²	'= <u> </u>	(OPEN FL		ELIVERABILITY % (I	r) CALCUL P _a - 14.4) +		:	(P <u>.</u> (P _d) ² = 0.207) ² =	
(P _e)*- (P _e)*		(P_)2 - (P_)2	Choose formula 1	h	$\overline{\Gamma}$		Backpressure Curve		Г 7 ;		Open Flow	
or (P _a)2 - (f	5)8		2. P*-P	formuta 1. or 2. and divide	P.*- P.		-or signed	nxL	LOG	Antilog	Deliverability Equals R x Antilog	
	-		divided by: P. F.	ed by: P.* - P.* by:			Standard Slope				(Mcfd)	
	 -		 					+	_			
Open Flor	l_ w		Mcfd ©	4.65 psia		Deliverat	oility	<u> </u>		Mcfd @ 14.65 ps	da	
The u	undersig	ned authority,		•	states th			make the		ort and that he ha		
						uted this the _1			OVEMBE		, 20 <u>10</u>	
10 facts st			, -	•				00	0. 01	and		
ne facts st							•		y . U11 1			
he facts st		Witnes	s (H any)		···-		è	Tes	Lil Y . (LLUKEY \	RECE	

	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator HERMAN L. LOEB LLC
-	t the foregoing pressure information and statements contained on this application form are true and
	to the best of my knowledge and belief based upon available production summaries and lease records
of equip	ment installation and/or upon type of completion or upon use being made of the gas well herein named. reby request a one-year exemption from open flow testing for the LONKER B-2
	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
	rther agree to supply to the best of my ability any and all supporting documents deemed by Commissic necessary to corroborate this claim for exemption from testing.
Date: <u>1</u>	1-17-10
	Signature: Leslie H. Ollhan
	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

Janette D. Loeb, Member/Manager

cc: Les Oldham

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