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

Type Test	:					(	See Instruc	tions on Rev	rerse Side	<b>)</b>					
✓ Open Flow					Test Date	<del>)</del> :			API No. 15						
De	liverabil	ty				10/26/20	010				-077-21324	1-000	<u>)                                    </u>		
Company Atlas Operating LLC					Lease WINGATE "B"				' 1			Well Number			
County Location HARPER NW-SE-SW				Section 3		TWP 31			<sup>w</sup> ر	Acres Attributed		Attributed			
					Reservoir MISSISSIPPI			Gas Gathering Connection ONEOK							
Completion Date				Plug Bac 4595	Plug Back Total Depth 4595				Set at						
Casing Size Weight 5 1/2 14				Internal C	Diameter		Set at 4645		rations 9	To 4513					
Tubing Size Weight 2 3/8 4.7			Internal Diameter Set at 2 4568				Perfo	rations	То						
				Type Flui	Type Fluid Production OIL & WATER				Pump Unit or Traveling Plunger? Yes / No PUMP UNIT						
		(Ann	ulus / Tubin	g)			% Carbon Dioxide				% Nitrogen Gas Gravity - G				
ANNUL		•		J,							•	<b>-</b>		9	
Vertical D	epth(H)				- / 1		Pres	ssure Taps	·· — ·	<u> =</u>		(Meter	Run) (P	rover) Size	
Pressure	Buildup	): {	Shut in 10	26	2	0 10 at		(AM) (PM)	Taken_1(	0/27	, 20	10 at		(AM) (PM)	
Well on L	ine:					0 at		. (AM) (PM)	Taken		20	at		(AM) (PM)	
		7					OBSERVI	ED SURFACE	•	-		Duration of Shut	-In_24	Hours	
Static / Orifi Dynamic Siz Property (inch		ZB Prover Press		ure	Pressure Flowing Differential Temperature in t		Well Head Temperature t	Wellhead	Casing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> ) psig psia		Tubing rad Pressure r (P, ) or (P, )	Duration (Hours)		id Produced Barrels)	
Shut-in					· - · - · -			80	p.c	psig	pad				
Flow			<del></del> -,				<u>.</u> .								
۲.	1			_		<del></del>	FLOW ST	REAM ATTR	BUTES						
Plate Coeffictient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or Prover Pressure psia			Press Extension ✓ P <sub>m</sub> ×h		vity tor	Temperature Fa		viation Metered Flor actor R F <sub>pv</sub> (Mcfd)		y GOR (Cubic Feet/ Barrel)		Flowing Fluid Gravity G <sub>m</sub>	
				<u></u>		(OREN EL	OW /DEL !!	VERABILITY	CALCUI	ATIONE					
(P <sub>c</sub> ) <sup>2</sup> =		:	(P <sub>w</sub> )² :	-	:	P <sub>d</sub> =	, ,		) CALCUL ) - 14.4) +		:		) <sup>2</sup> = 0.2 ) <sup>2</sup> =	:07	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P <sub>a</sub> ) <sup>2</sup> - (P <sub>n</sub> ) <sup>2</sup>		Choose formula 1 or 2:  1. P <sub>e</sub> <sup>2</sup> - P <sub>e</sub> <sup>2</sup> 2. P <sub>e</sub> <sup>2</sup> - P <sub>e</sub> <sup>2</sup> divided by: P <sub>e</sub> <sup>2</sup> - P <sub>e</sub> <sup>2</sup>		LOG of formula 1, or 2. and divide	P.2 - P.2	Backpressure Curve Slope = "n"				Antilog	Op Del Equals	Open Flow Deliverability Equals R x Antilog (Mcfd)	
													<u> </u>		
Open Flo	w				Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 ps	ia.		
								he is duly au d this the <u>8</u> t			lovember	rt and that he h		ledge of	
								_				·	R	ECEIVE	
			Witness								For C	ompany			
			For Com	missic	on			_			Chec	ked by	N(	JV 122	

	lare under penalty of perjury under the laws of the state of Kansas that I am authorized to request						
	tatus under Rule K.A.R. 82-3-304 on behalf of the operator Atlas Operating 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 WINGATE "B" #1						
	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 furti	her agree to supply to the best of my ability any and all supporting documents deemed by Commission						
staff as n	ecessary to corroborate this claim for exemption from testing.						
Date: <u>11</u>	708/2010						
	Signature: Amul-Camas						
	Title: PRODUCTION COORDINATOR						

## 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.