RECEIVED

Form G-2 (Rev. 7/03)

KANSAS CORPORATION COMMISSION AUG 3 0 2012 ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t :			(See Instruct	ions on Rev	erse Side)	,	ICC MICH	ITA
Open Flow			Test Date: API No.						. , ,	117	
Del	liverabilty			07/08/12					100. 13 107-22502 - (00-02	
Company WOOLS		RATING COM	MPANY, LLC			Lease ELLIS				G-5	Well Number
County Location BARBER SW SE NE		Section 34				RNG (E/W) 14W		Acres Attributed			
Field AETNA				Reservoir	SIPPIAN			Gas Gath	ering Conn	ection	
Completic	on Date				k Total Dept	h		Packer S	et at	······································	
6/10/96				5284			 	NONE			
Casing Size Weight 1.500 10.50			Internal Diameter 4.052		Set at 5330		Perforations 4706		то 47 56		
		Weight 4.70	i	Internal D	Diameter	meter Set at 4790		Perforations OPEN		То	
Type Completion (Describe)			Type Fluid Production				Pump Unit or Traveling Plunger? Yes / No PUMPING				
SINGLE		nulus / Tubing	<u> </u>	WATE.	arbon Dioxid	de		% Nitroge		Gas Gr	avity - G
ANNUL		mulus / ruomg	,	,, ,	arborr broxii	-		70 (M.Og.	.,,		, G
Vertical D	epth(H)				Press	sure Taps				(Meter i	Run) (Prover) Siz
4549	D. 24	07/0	08	. 12			07	7/09		12 at	(4.5.4) (75.5.4
Pressure	•										
Well on Li	ine:	Started	2(J at		(AM) (PM)	ıaken		20	at	(AM) (PM
			· ·	-	OBSERVE	D SURFACE	DATA			Duration of Shut-	in Ho
Static / Dynamic	Orifice Size	Circle one: Meter	Pressure Differential	Flowing Temperature	Well Head Temperature	Casing Wellhead Pressure		Tubing Wellhead Pressure		Duration	Liquid Produced
Property	(inches)	Prover Pressu psig (Pm)	re in Inches H ₂ 0	t	t	(P _w) or (P _p	(P _w) or (P _t) or (P _c)		(P _L) or (P _e)	(Hours)	(Barrels)
Shul-In						33		35		24	
Flow						36					
					FLOW STR	EAM ATTRI	BUTES				
Plate Coeffieci (F _b) (F Mcfd	ient } Pi	Circle one: Meter or over Pressure psia	Press Extension P _m xh	Grav Fac F _c	tor T	Flowing Temperature Factor F ₁₁		eviation Metered Fig. Factor R F _{pv} (Mcfd)		w GOR (Cubic Fe Barrol)	Crouds
				(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P _x)	² = 0.207
(P _e)2 =	:	(P _w) ² =		P _d =		% (P	_e - 14.4) +	14.4 =	;		²
(P _c) ² - (F or (P _c) ² - (F	"	P _c) ² - (P _w) ²	1. P _c ² -P _s ² 2. P _c ² -P _c ²	LOG of formula 1. or 2. and divide	P _c ² -P _w ²	Slop	signed	n x L	.og	Antilog	Open Flow Deliverability Equals R x Antil
			divided by: P _a ² · P _w ²	by:	<u>_</u> " <u>"</u>	Standa	ard Slope				(Mcfd)
Open Flor			Mofd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 ps	ia ooze
		ed authority, or			states that h	e is duly au	thorized t	o make th	e above repo	ort and palifie ha	<u> </u>
he facts s	tated then	in, and that a	id report is true			-		day of Al	•		20 12
د مارات ر مستعین	_{retri} ode 1 ar Coff	-anondenc	6			-	We	nK	(Val	land	
		WOMING OF THE PROPERTY OF THE	1849) 15						For	Company	
ists W	iclera	For Comm	ission	-		_			Che	cked by	

exempt sta and that the correct to	are under penalty of perjury under the laws of the state of Kansas that I am authorized to request atus under Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO., LLC he foregoing pressure information and statements contained on this application form are true and the best of my knowledge and belief based upon available production summaries and lease records ent installation and/or upon type of completion or upon use being made of the gas well herein named.
	by request a one-year exemption from open flow testing for the ELLIS G-5
	n 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 er agree to supply to the best of my ability any and all supporting documents deemed by Commission eccessary to corroborate this claim for exemption from testing.
Date: <u>08/3</u>	
	Signature: Win L Soullayer Title: FIELD MGR.

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.