KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Re	everse Side	9)					
	en Flo liverab				Test Date	: :				1 No. 15 722964 ~~	D-01			
Company M&M Ex		ion,	Inc.				Lease Z Bar				15-4	Well N	umber	
County Barber		Location 1000 FNL 600 FWL		Section 15		TWP 34		RNG (E/W) 15W			Acres Attributed 160			
Field Aetna Gas Area				Reservoir Ft. Scott					as Gathering Connection		RECE			
Completic 08/29/20		e			Plug Back Total Dept 4762'		h		Packer Set at None			NOV D 10 4734' KCC WC		
Casing Size 4.5		Weight 10.5			Internal Diameter 4.052		Set at 5098'		Perforations 4726'		то 4734	To KC(
Tubing Size 2.375		Weight 4.7			Internal Diame 1.995		Set at 4751 '		Perforations		То		• • • • • • • • • • • • • • • • • • • •	
Type Con Single (ı (De	escribe)		,,	d Productio ter/Crude			Pump U Pump	nit or Traveling Unit	Plunger? Yes	/ No	<u></u>	
Annulus	3	· 	nulus / Tubing	% C 0.063	arbon Diox		e % Nitrogen 3.341		_	Gas Gravity - G ₉ 0.6799				
Vertical D	epth(H	I)				Pres	sure Taps				(Meter	Run) (P	rover) Size	
Pressure			Shut in		0 12 at 1						12 at 1:00			
Well on L	me:	,	Started		u aī		(AM) (PM)	iaken		20	at		(AM) (PM)	
						OBSERVE	D SURFAC	E DATA			Duration of Shu	t-in	Hours	
Static / Dynamic Property	Orifi Sizi (inchi	e Prover Pressure		Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In							32	46.4	psig	psie				
Flow														
						FLOW STF	REAM ATTR	RIBUTES						
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension √ P _m x h	Grav Fact F _c	tor	Temperature		viation Metered Flow actor R F _{pv} (Mcfd)		(Cubic Feet/ Barrel)		Flowing Fluid Gravity G _m	
					(OPEN EL (OW) (DELIV	ERABILITY	O CAL CUI	ATIONS	L				
(P _c) ² =		:	(P,,,)2 =	:	•	, ,		P _c - 14.4) +		;		$)^2 = 0.2$ $)^2 = $		
(P _c) ² - (F or (P _c) ² - (F	P _a) ²	(P		: thoose formula 1 or 2 1. P _c ² - P _d ² 2. P _c ² - P _d ² vided by: P _c ² - P _w ²	1. or 2.	P _c ² -P _w ²	Backpre Slo	essure Curve pe = "n" or ssigned dard Slope	•	LOG	Antilog	O De Equals	pen Flow liverability s R x Antilog (Mcfd)	
Open Flor	W			Mcfd @ 14.	65 psia		Deliverat	oility			Mcfd @ 14.65 ps	ia		
		_	-		-		•				ort and that he h			
the facts st	tated th	nerei	n, and that sai	d report is true	e and correc	t. Executed	I this the		day of				20 12 .	
			Witness (if	any)				b	m	october make the second of th	Company		 	
		_	For Commis	sion			-			Che	cked by			

RECEIVED NOV 0 2 2012

KCC WICHITA
I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
xempt status under Rule K.A.R. 82-3-304 on behalf of the operator M&M Exploration, Inc.
nd that the foregoing pressure information and statements contained on this application form are true and
orrect to the best of my knowledge and belief based upon available production summaries and lease records
f 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 Z Bar 15-4
as well 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
I further agree to supply to the best of my ability any and all supporting documents deemed by Commissic taff as necessary to corroborate this claim for exemption from testing.
ate: October 29, 2012
Signature: Inl nur
Title: President

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.