KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | t: | | | | (| See Instruct | ions on Re | verse Side | 9) | | | | |
|---|-----------------------------|--|--|---|--|--------------------------------|---|--|--|-----------------------------|--|--|---|
| ⊘ op | en Flor | w | | | Test Date | a: | | | API | No. 15 | | | |
| De | liverab | ilty | | | 10/10/1 | | | | | | 00-00 | | |
| Company BEREN | | RP | | | | | Lease JACQI | JART | | | 1-27 | Well Num | ıber |
| County STANTON | | | Locatio NE NE | | Section 27 | | | TWP 30 | | W) | Acres Attribut | | |
| Field BEAUCHAMP | | | | | Reservoi U. MO | r RROW | | | Gas Gathering Conr DUKE | | ection | To KCC W | |
| Completion Date 10/15/81 | | | | • | Plug Bac 5320' | Plug Back Total Depth 5320' | | n Packer NON | | | | 12 | DEC O. |
| Casing Si 4 1/2" | ize | | Weight 10.5 | | Internal I 4.052 | Internal Diameter 4.052 | | Set at 5468' | | rations 1' | то 5076' | то <i>ЛС(</i> 5076' | |
| Tubing Size 2 3/8" | | | Weight 4.7 | | Internal Diameter 1.995 | | Set at 5030' | | Perforations N/A | | То | То | |
| Type Completion (Describe) SINGLE GAS | | | escribe) | Type Fluid Production NONE | | | 1 | | Pump Unit or Traveling | | g Plunger? Yes / No | | |
| Producing | _ | (Anr | nulus / Tubing) | 1 | % C | Carbon Dioxi | de | | % Nitrog | en | Gas Gr .804 | avity - G | ı |
| Vertical D | | ł) | | | | Pres | sure Taps | | | | | Run) (Pro | over) Size |
| Pressure | Buildu | p: | Shut in10/9 | <u>/</u> 2 | 12 _{at} 8 | АМ | (AM) (PM) | Taken_1(| 0/10/ | 20 | 12 _{at} 8 AM | (A | .M) (PM) |
| Well on L | | • | | | | | | | | | at | | |
| | | | | | | OBSERVE | D SURFAC | E DATA | | | Duration of Shut- | in_24 | Hours |
| Static / Dynamic Property | namic Size | | Circle one: Meter Prover Pressur psig (Pm) | Pressure Differential in Inches H ₂ 0 | Flowing Well Heat Temperature Temperat t t | | e (P _w) or (P _t) or (P _c) | | Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) | | Duration (Hours) | | Produced arrels) |
| Shut-In | | | poig (i iii) | Indies 1120 | | | psig | psia | psig 160 | psia | 24 | | |
| Flow | | | | | | | | | | | | | |
| | | | | | | FLOW STR | EAM ATTR | IBUTES | | | | | |
| Plate Coeffiecient (F _b) (F _p) Mcfd | | Circle one: Meter or Prover Pressure psia | | Press Extension P _m x h | Extension Fac | | Tomporoturo | | riation actor = pv | Metered Flow R (Mcfd) | v GOR (Cubic Fe Barrel) | 1 | Flowing Fluid Gravity G _m |
| <u> </u> | | | | | | | | | | | | | · |
| (P _c) ² = | | _: | (P _w) ² =_ | : | (OPEN FL P _d = | OW) (DELIV | |) CALCUL ' 14.4) + | | <u>:</u> | (P _a) (P _d) | ² = 0.20 ³ ² = | 7 |
| (P _c) ² - (I | | (F | P _c) ² - (P _w) ² | hoose formula 1 or a 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ ivided by: $P_c^2 - P_w^2$ | LOG of formula 1. or 2. and divide | | Slop As | ssure Curve pe = "n" - or signed ard Slope | n x i | .og [] | Antilog | Delive Equals F | n Flow erability R x Antilog Icfd) |
| | | | | | | | | | | | | | |
| Open Flo | Open Flow Mcfd @ 14.65 psia | | | | | Deliverab | Deliverability | | | Mcfd @ 14.65 psia | | | |
| | | ione | d authority on | | · · · · | states that h | | | o make th | | rt and that he ha | | edge of |
| | | _ | in, and that sai | | | | | | | OVEMBER | ? | | 12 |
| | | | Witness (if | any) | | | • | | _'orl | AI UM Follo | Jompany | | |
| | | _ | For Commis | sslan | *************************************** | | _ | | | Che | ked by | | |
| | | | | | | | | | | | | | |

DEC 0 3 2012

KCC WICHITA

| KCC WIC | ירווד <i>י</i> ר | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| I declare under penalty of perjury under the laws of the state of Kansas that I am authorize exempt status under Rule K.A.R. 82-3-304 on behalf of the operator BEREN CORP | ed to request | | | | | | | |
| 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 le | ease records | | | | | | | |
| of equipment installation and/or upon type of completion or upon use being made of the gas well he I hereby request a one-year exemption from open flow testing for the <u>JACQUART 1-27</u> | erein named. | | | | | | | |
| gas 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 a source of natural gas for injection into an oil reservoir undergoing ER | | | | | | | |
| is on vacuum at the present time; KCC approval Docket No. | ocket 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 l | by Commissio | | | | | | | |
| staff as necessary to corroborate this claim for exemption from testing. | | | | | | | | |
| Date: 11/28/12 | | | | | | | | |
| Date. 11120112 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Signature: Beth Bly | | | | | | | | |
| Title: PETROLEUM ENGINEER | | | | | | | | |
| ilue. | | | | | | | | |
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| | | | | | | | | |

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.