NOV 2 1 2012

KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

KCC WICHITA

(See Instructions on Reverse Side)

= -	en Flov iverabi				Test Date 8/16/12	;			API	No. 15 025	5-10009 - © 0	2-00	<u>.</u>
Company BEREXC		0					Lease McMIN	IMY			1-19	Well Number	
County CLARK			Locati CN/2 I		Section 19		TWP 33S		RNG (E/W) 21W		Acres Attributed N/A		ed
Field SITKA					Reservoir CHESTER/ST G				Gas Gathering Conne REDWING		ection		
Completic 8/10/19)	•		Plug Back 5400	Total Dept	h		Packer S	et at			
Casing Size		_	Weigh	ıt	Internal Diameter 4.09		Set at 5474		Perforations 5358		то 5396		
4.5 Tubing Size			Weight 4.7		Internal Diameter 1.995		Set at		Perforations		То		
2 3/8 Type Completion (E SINGLE GAS					Type Fluid Production WTR			Pump Unit or Traveling			Plunger? Yes	/ No	
	Thru		nulus / Tubing	g)		arbon Dioxi	de		% Nitrogo	en	Gas Gr 0.702	ravity - G _g	
Vertical Depth(H) 5393)		***************************************	Pressure Taps FLANGE						(Meter Run) (Prover) Size 3"		Size
Pressure	Buildu	D: :	Shut in 8/1	5/ 2	0_12_at_8			Taken 8/	16/	20	12 at 8:30 A	M (AM) (F	 PM)
Well on L	·										at		PM)
						OBSERVE	D SURFACE	DATA			Duration of Shut-	_in24	Hours
Static / Dynamic Property	Orific Size (inche	9	Circle one: Meter Prover Pressi psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Casi Wellhead (P _w) or (P psig	Pressure	Wellhea	ubing ad Pressure (P ₁) or (P _c)	Duration (Hours)	Liquid Produ (Barrets)	
Shut-In							46		, , , , , ,		24		
Flow													
						FLOW STE	REAM ATTR	BUTES	······································				_
Coeffied (F _b) (F	Plate Coefficient (F _b) (F _p) Mcfd		Circle one: Meter or over Pressure psia	Press Extension ✓ P _m xh	tension Facto		Temperature		ation ctor _{pv}	Metered Flor R (Mcfd)	w GOR (Cubic Fe Barrel)	eet/ Flu	wing uid avity
<u> </u>				<u> </u>				<u> </u>					
(P _c)² ≃		_:	(P _w)² =	<u> </u>	(OPEN FL	• •	'ERABILITY % (F) CALCUL ' 14.4) +		:	(P _a) (P _d)) ² = 0.207) ² =	
(P _c) ² - (l or (P _c) ² - (l		(F	P _c) ² - (P _w) ²	Choose formula 1 or 2 1. P _c ² - P _s ² 2. P _c ² - P _d ² divided by: P _s ² - P _w	LOG of formula 1. or 2. and divide	P _c ² . P _w ²	Slop As	ssure Curve be = "n" or	n x 1	.og []	Antilog	Open Flo Deliverabi Equals R x A (Mcfd)	ility Antilog
					<u> </u>								
Open Flo	w			Mcfd @ 14	.65 psia		Deliverab	ility			Mcfd @ 14.65 ps	ia	
The	unders	igne	d authority, c	on behalf of the	Company,	states that h	ne is duly au	uthorized to			ort and that he ha	as knowledge	of
the facts s	stated t	here	in, and that s	aid report is tru	e and correc	t. Executed	this the 19	9th	day of N	ovember		, 20 <u>12</u>	<u>2</u> .
	-		Witness	(if any)			-		- ~/	For	Company		
			For Com	mission	L 4 - 28 P. N. 1778 (1878)		-			Che	cked by		

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	KCC WICHITA
	er penalty of perjury under the laws of the state of Kansas that I am authorized to request ler Rule K.A.R. 82-3-304 on behalf of the operator BEREXCO LLC
	going pressure information and statements contained on this application form are true and
	t of my knowledge and belief based upon available production summaries and lease records
of equipment inst	allation and/or upon type of completion or upon use being made of the gas well herein named. est a one-year exemption from open flow testing for the McMINIMY #1-19
	ounds 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 e to supply to the best of my ability any and all supporting documents deemed by Commission y to corroborate this claim for exemption from testing.
Date: 11/19/12	
	Signature:

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.