KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | t: | | | • | (- | See Instruc | lions on He | verse Side | " | | | | |
|---------------------------------------------------|--------------------------|--------------------------------------------------|----------------|--------------------------------------------------------------------------------------------|------------------------------------|-------------------------------|-----------------------------------------------------|----------------------------------------------------------|---------------------------------------|------------------------------------------------------------------|----------------------------|------------------------|-----------------------------------------------------|
| = ' | en Flow liverabil | ty | | | Test Date 12/19/12 | | | | | No. 15 047-2008 | 3-00-00 | _ | |
| Company Oil Prode | | nc. of Kans | as | | | | Lease Potts | | | | 1-5 | Well Nu | ımber |
| County Edwards | | | cation E/4 | | Section 05 | | TWP 24S | | RNG (E/ 16W | W) | | Acres / | Attributed |
| Field | w | | | | Reservoir Mississi | | | | Gas Gat Lumen | hering Conn | ection | | |
| Completic 10/70 | on Date | | | | Plug Back 4248 | k Total Dep | th | | Packer S none | iet at | | | |
| Casing S 4.5 | ize | W | eight | | internal E | Diameter | Set 4 428 | | Perfo 419 | rations 9 | то 4226 | | |
| Tubing Si | ize | W | eight | | internal E | Diameter | Set : 418 | | Perfo | rations | То | - | |
| Type Con single | npletion | (Describe) | | | Type Flui | d Production | n | | | nit or Traveling Imping unit | | / No | |
| Producing | _ | Annulus / T | ubing) | ••• | % C | arbon Diox | ide | | % Nitrog | en | Gas G | iravity - (| G, |
| Vertical C | | | | | | Pres | sure Taps | | - | | (Meter | Run) (P | rover) Size |
| Pressure | Buildup | : Shut in _ | 12/18 | 2 | 0_12_at_1 | 0:15 am | (AM) (PM) | Taken_12 | 2/19 | 20 | 12 _{at} 10:15 | am | (AM) (PM) |
| Well on L | _ine: | | | | 0 at | | (AM) (PM) | Taken | | 20 | at | | (AM) (PM) |
| | | | | | | OBSERVE | D SURFAC | E DATA | 1 | | Duration of Shu | t-in_24 | Hours |
| Static / Dynamic Property | Orific Size (inche | Prover P | ter ressure | Pressure Differential in Inches H _s 0 | Flowing Temperature t | Well Head Temperature t | Wellhead | Pressure | Wellhe | Tubing ad Pressure r (P _t) or (P _c) psia | Duration (Hours) | 4 ' | id Produced (Barrels) |
| Shut-In | | | · , | * | | | 110.1 | 124.5 | , , , , , , , , , , , , , , , , , , , | puia | 24 | | |
| Flow | <u> </u> | | | | | | | | | | | | |
| | | | | | | FLOW STE | REAM ATTR | IBUTES | | | | | Ţ |
| Plate Coeffied (F _b) (F Mofd | ient ,) | Circle one: Meter or Prover Pressi psia | ure | Press Extension Pmxh | Grav Fact | tor | Flowing Temperature Factor F _{tt} | Fe | riation actor = pv | Metered Flor R (Mcfd) | w GOF (Cubic F Barre | eot/ | Flowing Fluid Gravity G _m |
| | | | | | | | | | _ | | | | <u> </u> |
| (P _c) ² = | | _: (P | | : | (OPEN FL | , . | 'ERABILITY % (I | ') CALCUL P _c - 14.4) + | | : | | $)^2 = 0.2$ $)^2 =$ | 207 |
| (P _c) ² - (l | | (P _c)²- (P _w)² | Cho | nose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ ded by: $P_c^2 - P_a^2$ | LOG of formula 1. or 2. and divide | P. 2 . P. 2 | Backpre Slo | essure Curve pe = "n" - or signed lard Slope | , n x | LOG [| Antilog | Del Equals | pen Flow liverability s R x Antilog (Mcfd) |
| | | | | | | | | | | | | | |
| 0=== 51: | | - | l | Maid & 14 | SE pois | | Deliverat | oilite | | | Mcfd @ 14.65 p | sia | |
| Open Flo | | ned authori | tv. on h | Mcfd @ 14. | | tates that h | | | o make th | ne above rend | ort and that he | | ledde of |
| | | | | report is true | | | | | dev of D | ecember | FE | B 1 5 | ₹013 CHITA |
| | | With | ness (il an | y) | <u> </u> | | • | | leur. | ING FOR | Company KC | CMIC | ATIHC |
| | | For | Commissi | on | | | - | | | Che | icked by | | |

| exempt status un and that the fore correct to the bes of equipment inst I hereby requ | der Rule K.A.R. 82-3-3 going pressure inform It of my knowledge and allation and/or upon typ | 04 on behalf of the ope ation and statements I belief based upon ava pe of completion or upo | tate of Kansas that I am ator Oil Producers, Inc. contained on this application summan use being made of the ing for the Potts #1-5 | of Kansas ation form are true and aries and lease records |
|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| _ | is a coalbed methanis cycled on plunger is a source of naturalis on vacuum at the plus not capable of profes to supply to the best | lift due to water al gas for injection into a present time; KCC app oducing at a daily rate i | n excess of 250 mcf/D all supporting documents | ng ER s deemed by Commission |
| Date: 12/20/12 | | Signature: | 12 C A | RECEIVED FEB 1 5 2013 |

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.