KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

Description Date SW SW SW 36 TVP RNG (EW) Acres Attributed Sarber SW SW SW 36 Substitution Section TVP SW SW SW 36 Substitution Section TVP SW SW SW 36 Substitution Section TVP SW SW SW 36 Substitution Section Sign Creek Field Services DEC U 4 SW COVERNMENT SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW SW	ype Test:				(3	ee instructi	ions on Rev	verse side	<i>=)</i>					
Company Company Company Company Company Company Control Company Comp					Test Date:						no o			
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Comparison Com	County Location							1 /						
Using Size Weight Very	Field Aetna Gas Area					pian							RECEIV	
Using Size Weight Circle Weight Circle Weight Circle	•						n 		Packer Set at			······ · · · · · · · · · · · · · · · ·		
Variety Completion (Describe) Conference					iameter			4925'		To ↑ (C WICH		
Code BRDN and Sand Frac. % Carbon Dioxide % Nitrogen frouduring Thru (Annulus / Tubing) Pressure Taps (Meter Run) (Prover) Size Pressure Buildup: Shut in April 29 20 12 at 1:00 (AM) (PM) Taken April 30 20 12 at 2:00	•		6.5				4850'						 .	
Annulus April 29 20 21 21 20 20 21 21 20 20 20	Type Completion (Describe) Acid BKDN and Sand Frac.				Gas & \	Nater			Pumping Unit		Unit			
Pressure Buildup: Shut in April 29 20 12 at 1:00	_	•	nnulus / [ubing)		% Ca	arbon Dioxid	de		% Nitrog	gen)	Gas Gr	avity - G	, 9	
Pressure Buildup: Shut in April 29				***		Press	sure Taps				(Meter f	Run) (Pr	rover) Size	
State / Orifice Core one Motor Orifice Size (Inches) Orifice Size (Inches) Orifice	^o ressure E		Shut in April	29 20	12 _{at} 1:0	00	(AM) (PM)	Taken A	pril 30	20	12 _{at} 2:00	(AM) (PM)	
Static Orifice Orifice Orifice Size Property Orifice Size Property Orifice Size Property Orifice Size Property Orifice Ori	Well on Lir	ne:	Started	20	at .		(AM) (PM)	Taken		20	at	(,	AM) (PM)	
Static Orifice Orifice Orifice Proper Pressure Proper Pressure Proper Proper Proper Proper Proper Pressure Proper						OBSERVE	D SURFACI	E DATA			Duration of Shut-	-in	Hours	
FLOW STREAM ATTRIBUTES Flow Plate Coefficient (F _p)(F _p) Prover Pressure psia P _m x h Flowing Factor F _s P _s x P _s	Dynamic Size		Meter Prover Pressure	Differential e in	Temperature Temperatur		Wellhead Pressure (P _w) or (P _c) or (P _c)		Wellhead Pressure (P _w) or (P _c) or (P _c)		1 '		ı	
FLOW STREAM ATTRIBUTES Plate Coefficient (F _e)(F _e) Mcfd Prover Pressure psia (OPEN FLOW) (DELIVERABILITY) CALCULATIONS (P _e) ² =	Shut-In		paig (: iii)	monos ri ₂ o				psia	psig	psia				
Plate Coefficient Meter or Prover Pressure $P_{p,3} = P_{p,3} = P_{p,4} = P_{p,4} = P_{p,3} = P_{p,4} = P$	Flow													
Coefficient (F _p)(F _p) And Prover Pressure (F _p)(F _p) And Prove Pressure (F _p)(F _p)(F _p) And Prove Pressure (F _p)(F						FLOW STR	EAM ATTR	IBUTES						
P _c) ² = : (P _w) ² = : P _d = % (P _c -14.4) + 14.4 = : (P _d) ² =	Coefficie		Meter or Extension rover Pressure		Facto	· I T	Temperature Factor		Factor		R (Cubic F		Fluid Gravity	
(P _c) ² - (P _a) ² (P _c	D \2		/D 22 =		•			-					07	
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the day of	(P _r) ² - (P		(P _r) ² - (P _w) ²	 P_c² - P_a² P_c² - P_d² 	LOG of formula 1 or 2 and divide		Backpres Slop Ass	ssure Curve pe = "n" or signed	•			Op Deli Equals	iverability R x Antilog	
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the day of												<u> </u>		
Witness (if any) Witness (if any) For Company)pen Flow	v		Mcfd @ 14.6	.i 65 psia		Deliverab	ility			Mcfd @ 14,65 ps	ia		
Witness (if any) For Company	The u	ndersign	ed authority, on	behalf of the	Company, st	ates that h	e is duly au	uthorized t	to make t	he above repo	ort and that he ha	as know	ledge of	
	e facts sta	ated ther	ein, and that said	d report is true	and correct.	Executed	this the		day of			. 2	20	
For Commission Checked by			Witness (if a	any)						For	Company			
			For Commis	sion						Che	cked by			

DEC U 4 2012

KCC WICHITA
I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Osage Resources, L.L.C.
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 lease records
of 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 Carr 2A-36
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 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 Commissi
staff as necessary to corroborate this claim for exemption from testing.
Date: 12/3/2012
<u> </u>
Signature:
Title: Geological Technician III
This.

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.