KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:					(See Instruc	ctions on Re	verse Side)				
✓ Op	en Flo	N				Test Date	·			A DI	No. 15			
De	eliverabi	ilty				05/29/20					095-00659	-0000		
Company Atlas Op		g LL	c					Lease MORR	RIS-WOL	.F		1	Well Nu	mber
County KINGMAN			Location SW-NE-NE			Section 35		TWP 30			W)		Acres A	Attributed
ield SPIVE	Y GR	ABS	 3			Reservoir MISSIS				Gas Gat	hering Conn	ection		
Completic		В				Plug Back	k Total Dep	oth		Packer S	Set at			
Casing S 5 1/2	asing Size 1/2		Weight 15.5			Internal Diamete 5		r Set at 4474		Perforations 4368		то 4422		, , , , , , , , , , , , , , , , , , , ,
ubing Size 3/8			Weight 4.7		Interna 2		Diameter		Set at 4336		rations	То		
Type Con		ı (De	escribe)				d Productio	on		Pump Ur PUMP	nit or Traveling	Plunger? Yes	/ No	
Producing	•	(Anr	ulus / Tubin	g)		% C	Carbon Diox	kide		% Nitrog	en	Gas G .680	ravity - (à
/ertical C		1)	· · -		<u>.</u>		Pres	ssure Taps	•				Run) (P	rover) Size
Pressure	Buildu	p: \$	Shut in _05/	/29	2	0_13_at		(AM) (PM)	Taken 05	/30		13 at	(AM) (PM)
Well on L	line:		Started		20	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
							OBSERVI	ED SURFAC	E DATA			Duration of Shut	-in_24	Hours
Static / Dynamic Property	ımic Size		Circle one: Meter Prover Pressure		Pressure Differential in	Flowing Temperature t	Well Head Temperature	I Wolfbood	Pressure	Tubing Wellhead Pressure $(P_+) \text{ or } (P_1) \text{ or } (P_2)$		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	(1116111	53)	psig (Pm)	incl	hes H ₂ 0		'	psig 20	psia	psig	psia		 	
Flow								20					-	
	1						FLOW ST	REAM ATTR	IBUTES					
Plate Coeffice (F _b) (F Mcfd	eient		Circle one: Meter or ver Pressure psia	Ext	Press tension Pmxh	Grav Fact	tor	Flowing Temperature Factor F ₁₁	Fa	iation ctor	Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)	eet/	Flowing Fluid Gravity G _m
				<u> </u>					<u> </u>					
P _c) ² =		:	(P _w) ² =	=	:	(OPEN FLO		VERABILITY	') ['] CALCUL _{'c} - 14.4) +		:) ² = 0.2	07
(P _c) ² - (I or (P _c) ² - (I		(P	c)2-(P _w)2	Choose to 1. P 2. P	mula 1 or 2.	LOG of formula 1, or 2, and divide	P _c ² - P _w ²	Backpre Slo 	ssure Curve pe = "n" - or	n x l	LOG	Antilog	Op Deli Equals	pen Flow iverability R x Antilog (Mcfd)
Open Flo				Mcl	d @ 14.	65 psia		Deliverat	oility			Mcfd @ 14.65 ps	ia	
The t	undersi	gned	authority, o	n beha	If of the	Company, s	states that	he is duly a			-	rt and that he h	as know	ledge of
e facts s	tated th	nereii	n, and that s	aid repo	ort is true	and correc	t. Executed	d this the $\frac{2}{}$	3rd	day of D	ecember		:	20 13
			Witness ((if any)				-		10	Mis W	and Company	KC	WICH
			For Comr	nission				-			Chec	ked by		3 0 20
														ECEIVE
													- 41	

	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request t status under Rule K.A.R. 82-3-304 on behalf of the operator Atlas Operating, LLC
and tha	at the foregoing pressure information and statements contained on this application form are true and
	to the best of my knowledge and belief based upon available production summaries and lease records
	pment installation and/or upon type of completion or upon use being made of the gas well herein named. ereby request a one-year exemption from open flow testing for the <u>MORRIS-WOLF</u> #1
	ell on the grounds that said well:
staff as	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 Inther agree to supply to the best of my ability any and all supporting documents deemed by Commission necessary to corroborate this claim for exemption from testing.
	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.

KCC WICHITA

DEC 3 0 2013

RECEIVED