KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruct	tions on Reve	erse Side)					
□ Ор	en Flov	٧			Test Date				A D1	No. 15				
De	liverabi	lty			09/27/13					No. 15 007- 22869-	00-00			
Company		ER	ATING COI	MPANY, LLC			Lease VOGEL			•	1	Well Nu	ımber	
County BARBER			Location N/2 SW		Section 30		TWP 33S		RNG (E/W) 10W			Acres Attributed		
Field					Reservoir MISSISSIPPIAN			Gas Gathering Connection						
Completion Date 2/1/05				Plug Bac 4758	Plug Back Total Depth 4758			Packer Set at NONE						
Casing Size 4.500			Weight 10.500		Internal Diameter 4.052		Set at 4792		Perforations 4600		то 4650			
Tubing Size 2.375			Weigh	t	Internal Dia 1.995		ameter Set at 4740		Perforations OPEN		То			
Type Completion (Describe) SINGLE			Type Flui	Type Fluid Production OIL, WATER			Pump Unit or Traveling Plunger? Yes / No PUMPING							
Producing	g Thru	(Anr	nulus / Tubing))	<u> </u>	arbon Dioxi	de		% Nitrog		Gas Gr	avity - (G _,	
Vertical D						Drae	sure Taps				/Motor I	D. (D	rover) Size	
4625	zebai(i i	,				F163	suie iaps				(INIBIBI)	ruii) (r	10461) 3126	
Pressure	Buildup	p; ;	Shut in09/2	27/13 2	0 at		(AM) (PM) 1	aken 09	9/28/13	20	at		(AM) (PM)	
Well on L	ine:	;	Started	2	0 at		(AM) (PM) 1	īaken		20	at	!	(AM) (PM)	
						OBSERVE	D SURFACE	DATA			Duration of Shut-	in	Hours	
Static / Dynamic Property	Dynamic Size		Circle one: Meter Prover Pressu		Flowing Well Head Temperature		Casing Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In			psig (Pm)	Inches H ₂ 0			psig 130	psia	psig 140	psia	24			
Flow														
						FLOW STR	EAM ATTRIE	BUTES						
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension	Grav Fact F _g	tor 1	Flowing Femperature Factor F ₁₁	prature Factor		Metered Flov R (Mcfd)	(Cubic Feet/ Barrel)		Flowing Fluid Gravity G _m	
(P _c) ² =			(P _w) ² =		(OPEN FLO		ERABILITY)	CALCUL - 14.4) +			(P _a)	² = 0.2	207	
				Choose formula 1 or 2	:		Backpress		1	<u>.</u> 		T	pen Flow	
(P _c) ² - (I or (P _c) ² - (I		(P	(P _w) ² - (P _w) ²	1. $P_c^2 - P_s^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide by:	P _c ² -P _w ²		e = "n" or gned d Slope	. nx	rog	Antilog	Del Equals	liverability s R x Antilog (Mcfd)	
Open Flo	<u> </u> w			Mcfd @ 14.	65 psia		Deliverabili	itv			Mcfd @ 14.65 ps	i <u> </u>		
		gned	authority, or		<u>.</u>	tates that h	-	-	o make th		rt and that he ha		/ledge of	
				id report is true						ECEMBER			20 13	
					KCC	Vines.		11	In a	P. Hu	Paul			
			Witness (i	any)						For C	ompany			
			For Comm	ission	DEC	; 3 1 2 0	-			Chec	ked by			

RECEIVEL

	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 WOOLSEY OPERATING CO., LLC
and that the foregoing pressu	re information and statements contained on this application form are true and
correct to the best of my knowl	ledge and belief based upon available production summaries and lease records
of equipment installation and/o	or upon type of completion or upon use being made of the gas well herein named.
I hereby request a one-yea	ar exemption from open flow testing for the VOGEL #1
gas well on the grounds that s	aid well:
(Check one)	
is a coalbed	d methane producer
is cycled or	n plunger lift due to water
is a source	of natural gas for injection into an oil reservoir undergoing ER
is on vacuu	m at the present time; KCC approval Docket No.
√ is not capa	ble of producing at a daily rate in excess of 250 mcf/D
I further agree to supply to	o the best of my ability any and all supporting documents deemed by Commission
staff as necessary to corrobor	rate this claim for exemption from testing.
Date: 12/17/13	
	_
	1 a M a O
	Signature: Win R Hallaugh

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.

