KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:					((See Instr	ructions on	Reve	rse Side)						
✓ Op	en Flo	w				Test Date	o.				ADI	No. 15					
De	liverab	ilty				12/01/2						5-23-0	0-00				
Company Atlas Op	/ peratin	ıg, L	LC					Leas Gw		Rende	r	-21 ,9 71		3	Well Nu	mber	
County Location Kingman NW-NW-NW				Section 1	TWP 308	TWP 30S			W)		Acres Attributed						
Field Spivey-	-Grat	s-B	Basil			Reservoi Missis:						hering Conn		ION, L	TD		
Completion Date 7-15-2005				Plug Bac 4250'	epth	F			Set at	· <u>-</u>							
Casing Size Weight 4.5" 10.5#				Internal I		Set at 4298'			rations 8'		то 421 6						
Tubing Size Weight 2 3/8" 4.7#				Internal I	_	Set at 4244'		Perfo	rations	-	То						
Type Con Single (escribe)			Type Flu Water	id Produc	tion	· · ·		Pump Ur Pump	nit or Traveling Unit	g Plunger	r? Yes	/ No		
Producing Thru (Annulus / Tubing) Annulus				% (oxide	8			en		Gas Gravity - G _g						
/ertical D		1)						ressure Tap PE	s	<u> </u>				(Meter I	Run) (P	rover) Size	
Pressure	Buildu	p:	Shut in12/	01	2	0_13_at_1	0:15am	(AM) (F	PM) T	aken_12	/02	20	13 at.	10:15a	im ((AM) (PM)	
Well on Line: Si			Started	orted 20) at (aken	20		at		(AM) (PM)		
<u></u>	1						OBSER	VED SURF					Duration	n of Shut-	in 24	Hours	
Static / Dynamic Property	mamic Size		Circle one: Meter Prover Pressure psig (Pm)		Pressure Differential in Inches H ₂ 0 Flowing Temperature		Well Hea Temperati	ure (P _*)	Casing Welihead Pressure $(P_w) \circ (P_1) \circ (P_c)$ psig psia		Tubing Wellhead Pressure (P_w) or (P_1) or (P_c) psig psia		Duration (Hours)		Liquid Produced (Barrels)		
Shut-in								210		рыа	90	psia					
Flow												}					
							FLOW S	TREAM A	TTRIE	BUTES							
Plate Coeffied (F _b) (F	ient ,)	Pro	Circle one: Meter or Prover Pressure psia		Press tension P _m xh	Gra Fac	ctor	Flowing Temperate Factor F _{rt}	nperature Fa		viation Metered Flov actor R F _{pv} (Mcfd)		w GOR (Cubic Fed Barrel)			Flowing Fluid Gravity G _m	
P 12 =			(P)2=			(OPEN FL	, ,	LIVERABIL	,	CALCUL - 14.4) +				(P _a) (P _d)	² = 0.2	07	
(P _c) ² - (P _d) ² or (P _c) ² - (P _d) ²			P _c) ² - (P _w) ²	1. F 2. F	ormula 1 or 2 0 2 - P 2 0 2 - P 2 0 2 - P 2 0 7 - P 3	LOG of formula 1, or 2.		Bac	Backpressure Curve Slope = "n"or Assigned Standard Slope		n x log		Antilog		Open Flow Deliverability Equals R x Antilog (Mcfd)		
Open Flo	w			Мс	fd @ 14	65 psia		Deliv	erabili	ty			Mcfd @	14.65 ps	ia		
		-	•			, ,			-			ne above repo	ort and ti	hat he ha	s know	ledge of	
e facts s	stated t	herei	in, and that sa	aid rep	ort is true	and correc	ct. Execut	ted this the	315	st	day of <u>~</u> /	ecember	(/4			20 13	
		••	Witness (i	if any)				_	-		Įζ	VW) /	Ompany	<u>:(IC)</u>	KCC	WICH 0 6 201	
			For Comm	nission				_	_			Che	cked by		JAN	0 6 201	
															RI	ECEIVE	

	eclare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator Atlas Operating, LLC
and tha	t 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
	oment installation and/or upon type of completion or upon use being made of the gas well herein named. Freby request a one-year exemption from open flow testing for the Gwynn-Render #3
gas wel	If 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 rther 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: Ruis Wangck
	Title: Regulatory Coordinator

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

JAN 06 2014