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

Type Test API No. 15-017-20823 - 0000 Open Flow Test Date: 11/25/2013 Deliverability Company Lease Well Number Giger Section County RNG (E/W) Location Acres Attributed Chase Field C N/2 N/2 S/2 Section 28-19S-7E Gas Gathering Connection Elmdale American Energies Pipeline Completion Date Plug Back Total Depth Packer Set At 4/19/2002 1234 None Casing Size Internal Diameter 4 1/2" Tubing Size 1234 Internal Diameter Set at Weight Perforations 2 3/8"
Type Completion (Describe) 1 995 1218 None Pumping Unit or Traveling Plunger? Yes/No Type Fluid Production Single Producing Thru (Annulus/Tubing) % Carbon Dioxide % Nitrogen Gas Gravity - Gg 0.0528 0 701 Tubing Vertical Depth (H) Pressure Taps (Meter Run)(Prover) Size 1218 Flange 11/25/13 Pressure Buildup: 10:00 AM (AM)(PM) Taken 11/25/13 10:00 AM (AM)(PM) Well On Line: Started 11/26/13 10:00 AM (AM)(PM) Taken 11/26/13 10:00 AM (AM)(PM) Duration Shut-in **OBSERVED SURFACE DATA** Tubing Circle One Meter Pressure Casing Wellhead Pressures Static Orifice Differentia Flowing Well Head Wellhead Pressures Ouration Liquid Produced Size (Pw) or (Pr) or (Pc) (Pw) or (Pt) or (Pc) Temperatur Temperature inches H₂C Property (inches psig (Pm) Shut-ir FLOW STREAM ATTRIBUTES Plate Flow R Coefficient Temperature Deviation GOR Fadd Factor (Cubic Feet/ Gravity Factor Factor (%) (F_P) Prover Pressure √PmXh Fg (mcfd) Barrel) psia (OPEN FLOW) (DELIVERABILITY) CALCULATIONS (Pa)2=0.207 (Pa)2= (Pc)2= (P_{*})2= (P-14.4)+14.4= Backpressure Curv Choose formula 1 or 2: LOG of Open Flow (Pc)2-(Pa)2 (Pc)2-(Pw)2 1. Pc2-Pa2 N X LOG [] 2. Pa2-Pd2 1. or 2. or Assigned Equals R X Antilog (Pc)2-(Pc)2 divided by Pc2-Pw2 nd divide by Standard Slope (mcfd) Open Flow Mcfd @ 14.65 psia Deliverabiltiy Mcfd @ 14 65 psia '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 December, 2013 9th Witness (if any) Mark Bieker, Director of Operations For Commission Checked by

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exempt status under Rule K.A.R. 82-3-304 on behalf of the operator		Trek AEC. LLC
and that the foregoing pressu	ire information and statements contained on this app	olication form are true and
correct to the best of my know	viedge and belief based upon available production s	summaries and lease records
of equipment installation and	for 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		Giger A
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.	
X	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 suppor	rting documents deemed by the Commission
staff as necessary to corrobo	rate this claim for exemption from testing.	(A) 100/ a
Date	12/9/2013 Sig	gnature. Mark W D

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 under the claim of eligibility for exemption IS denied.

The G-2 form conveying the newest shut-in pressure reading shall be filled 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.

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