KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

	n Flow															
Deliv	verabilty	/			Test Date 08/23/20						No. 15 5 -21695-0 0	000				
Company Atlas Ope	erating	LLC						Lease MORR	IS-WOI	_F-KEIN	ИIG		3	Well Numb	er	
County Location KINGMAN SW/4				Section 35			TWP 30		RNG (E/W)				Acres Attributed			
Field SPIVEY	GRA	BS		**************************************	Reservoir		1			Gas Gat	thering Cor	nection	1			
Completion					Plug Bac 4575	k Total i	Depth			Packer S	Set at					
Casing Size Weight 5 1/2 14			Internal Diameter 5			Set at 4575		Perforations 4422		•	To 4448					
Tubing Size	ubing Size Weight			Internal Diameter			Set at 4495		Perforations			То				
Type Comp					Type Flui	Type Fluid Production OIL & WATER			Pump Unit or Traveling PUMP UNIT			ng Plun	g Plunger? Yes / No			
Producing Thru (Annulus / Tubing) ANNULUS			% C	% Carbon Dioxide				% Nitrogen				Gas Gravity - G _g				
Vertical De 4422			-,-			Pressure Taps PIPE						,		Run) (Prov	er) Sıze	
Pressure B	Buildup:	Shut in	8/23	2	0 14 at 8			AM) (PM)	Taken_08	3/24	3/24 20		14 9:00		1) (PM)	
Well on Lin	ne	Started		20	0 at		(#	AM) (PM)	Taken		2	20	at		1) (PM)	
						OBSE	RVED	SURFAC	E DATA			Dura	ation of Shut-	n_24	Hours	
Static / Dynamic Property	Orifice Size (inches)	Prover Pres	ssure	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well He Tempera		Cas Wellhead (P _w) or (P	Pressure	Tubing Wellhead Pressure (P_w) or (P_t) or (P_c)			Duration ((Hours)		roduced rels)	
Shut-In		1.0.	•	2		<u> </u>	;	38	рыа	psig	psta				-	
Flow																
	-					FLOW	STRE	AM ATTR	IBUTES							
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one Meter or Prover Pressure psia	,	Press Extension P _m xh	Fac	Gravity Factor F _g		Flowing nperature Factor	Fa	riation letor = pv	Metered Flow R (Mcfd)		GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m	
			i]	<u> </u>			
P _c) ² =		(P _w):	² =	:	(OPEN FL		ELIVEF %		•		<u> </u>		(P _a)	² = 0.207		
(P _c) ² - (P _a or (P _c) ² - (P _d	a) ²	(P _c) ² - (P _w) ²		0 cose formula 1 or 2 1. P _c ² - P _a ² 2 P _c ² - P _d ² and divided by P _c ² - P _w ²				Backpressure Curve Slope = "n" or Assigned Standard Slope		n x LOG			Antilog Ec		Flow rability x Antilog fd)	
									·						•	
Open Flow	'			Mcfd @ 14.	65 psia			Deliverab	ulity			Mcfd	@ 14 65 ps	a		
		ned authority,						-			ne above re september		d that he ha	s knowled	_	
		Witnes	s (if an	у)			_	-			F	or Compan	y K ANS	Rec SAS CORPOR	eived ATION COMM	
		For Co	mmissi	on			_	-			C	hecked by			J 3 2014	

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 Atlas Operating LLC 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 MORRIS-WOLF-KEIMIG #3 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. vis 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 Commissional Staff as necessary to corroborate this claim for exemption from testing. Signature: Signature: Signature:		
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Signature: Row Warrel	taff as necessa	ry to corroborate this claim for exemption from testing.
Signature: Row Wanch		
	oate: 09/23/201	4
		(1)
Title: Regulatory Coordinator		Signature: 1 CAW WAMLEYC

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.

Received KANSAS CORPORATION COMMISSION

OCT 03 2014