KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruct	tions on Reve	erse Side)				
□ Ор	en Flo	w			Test Date				ΛDI	No. 15			
De	liverat	oilty			10/2/14	·•				07-23760-0	000		
Company		PER	ATING CC	MPANY, LLC		Lease FOREST	Lease FORESTER				Well Number F-2		
County BARBER	₹		Locat E2 NE		Section 26		TWP 33		RNG (E/	W)	,	Acres A	ttributed
Field ROUND	UP S	OUT	Н	-	Reservoir MISSIS:	SIPPIAN			Gas Gath	nering Conne	ection		
Completic 11/14/11		te			Plug Baci 4905'	k Total Dept	th		Packer S NONE	et at			
Casing Size Weight 5.500 15.500				Internal C 4.950	Diameter		Set at 4950'		ations	то 4615'		_	
Tubing Size Weight 2.375 4.70				Internal E 1.995	Diameter	Set at 4679'		Perforations OPEN		То			
Type Con SINGLE		n (D	escribe)		Type Flui- OIL, W	d Production	n		Pump Un PUMP	it or Traveling ING	Plunger? Yes	/ No	
Producing	_	(Anı	nulus / Tubin	g)	% C	arbon Dioxi	đe		% Nitroge	en	Gas Gr	avity - G	g .
Vertical D		1)				Pres	sure Taps				(Meter I	Run) (Pr	over) Size
	Buildu	ıp:	Shut in 10	/1/14 2	 0 at		(AM) (PM) T	Taken_10)/2/14	20	at		 AM) (PM)
Well on L					0 at		(AM) (PM)	Taken		20	at	(/	AM) (PM)
						OBSERVE	D SURFACE	DATA			Duration of Shut-	in	Hours
Static / Dynamic Property	Orif Siz (inch	že	Circle one: Meter Prover Press	***	Flowing Temperature t	Well Head Temperature t	Casin Wellhead P (P _w) or (P ₁)	ressure	Wellhea	ubing ad Pressure (P ₁) or (P ₀)	Duration (Hours)		Produced
Shut-In			psig (Pm)	Inches H ₂ 0			psig 150	psia	psig 100	psia	24		
Flow													
				•		FLOW STR	REAM ATTRIE	BUTES	•				
Plate Coeffiec (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F _{rt}	Fa	iation ctor	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)		Ftowing Fluid Gravity G _m
					Ī		_						
					(OPEN FL	OW) (DELIV	'ERABILITY)	CALCUL	ATIONS		(P _a)	²= 0.20	
(P _c) ² =		<u>-</u> :	(P _w) ² :	<u> </u>	$P_d =$		% (P _e	- 14.4) +	14.4 =	:	(P _d)	² =	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _c) ² - (P _w) ²		1. P ₀ ² - P ₃ ² 2. P _c ² - P _d ² divided by: P _c ² - P _d ²	LOG of formula 1. or 2. and divide	formula 1. or 2. and divide p_2_p_2		Backpressure Curve Slope = "n" or Assigned Standard Slope		.og []	Antilog	Open Flow Deliverability Equats R x Anti (Mcfd)	
	_			, c w			-	· ·					
Open Flo	w			Mcfd @ 14.	65 psia		Deliverabil	ity		_	Mcfd @ 14.65 psi	ia	
		•	•	on behalf of the aid report is true	• •		•			e above repo CTOBER	rt and that he ha		edge of 20 <u>14</u> .
							Poss	iv 21)	m le	1 Oth	Mank		
			Witness	(if any)		KAN	ISAS CORPORA	TION COM	AISSION .	For C	Company		
			For Com	mission			OCT 2	2 201	1	Chec	cked by		

CONSERVATION DIVISION WICHITA, KS

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 WOOLSEY OPERATING CO., 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 FORESTER F-2
gas well on the grounds that said well:
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 I further agree to supply to the best of my ability any and all supporting documents deemed by Commission staff as necessary to corroborate this claim for exemption from testing. Date: 10/15/14
Signature: Wm & Hallay Ch. Title: FIELD MGR.

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.