KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

= :	: en Flov liverabi		-		Test Date 8/4/14		ions on Rev	verse Side	API	No. 15 007-22484-0	20.00		
Company WOOLS		DER	ATING CO	MPANY II C	0/4/14	<u>-</u>	Lease ELLIS			JU <i>1-</i> ZZ 404 -(Well Number	
WOOLSEY OPERATING COMPANY, LLC County Location BARBER SW SE SE				Section 27		TWP 33S		RNG (E/W) 14W		Acres Attributed			
Field AETNA					Reservoir	SIPPIAN	Gi			hering Conn	ection		
Completic 3/21/96	n Dat	в	<u> </u>		Plug Back Total Depth 5280		1		Packer Set at NONE				
Casing Size 4.500			Weigh 10.50		Internal Diameter 4.052		Set at 5327		Perforations 4674		To 4784		
Tubing Size 2.375			Weight 4.70		Internal Diameter 1.995		Set at 4757		Perforations OPEN		То		
Type Completion (Describe) SINGLE				Type Flui WATE	d Production	1	Pui		Pump Unit or Traveling Plunger? PUMPING		/ No		
Producing Thru (Annulus / Tubing) ANNULUS				% C	arbon Dioxi	de	% Nitrogen		Gas Gravity - G _g				
Vertical D 4729	epth(H	1)				Pres	sure Taps				(Meter F	Run) (Prover) Size	
Pressure	Buildu	p: \$	Shut in 8/3	/14 2	0 at		(AM) (PM)	Taken_8/	4/14	20	at	(AM) (PM)	
Well on Li	ine:	;	Started							20	at	(AM) (PM)	
	-					OBSERVE	D SURFACE	E DATA		_	Duration of Shut-i	inHours	
Static / Dynamic Property	namic Size		Circle one: Meter Prover Presst		Flowing Well Head Temperature t t		(P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P_w) or (P_l) or (P_c)		Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	hut-In		psig (Pm)	Inches H ₂ 0			psig 54	psia p		psia	24		
Flow										_			
						FLOW STR	EAM ATTR	IBUTES	ı	_			
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension P _m x h	Grav Fac F	tor	Flowing Temperature Factor F _{it}		iation ctor pv	Metered Flor R (Mcfd)	w GOR (Cubic Fe Barrel)	Growitz	
				,									
(P _c) ² =		:	(P _w)² ≃	: :	(OPEN FL		ERABILITY % (F) CALCUL ² 14.4) +		:	(P _a); (P _d);	²= 0.207 ²=	
$(P_o)^2 - (P_e)^2$ or $(P_o)^2 - (P_d)^2$		(P _o) ² - (P _w) ²		Choose formula 1 or 2 1. P _c ² -P _c ² 2. P _c ² -P _d ² divided by: P _c ² -P _d ²	1. P ² -P ² 2. P ² -P ² 2. P ² -P ² 2. P ² -A 2. P ² -A 3. Or 2. And drivide		Backpre- Slop Ass	Backpressure Curve Slope = "n" or Assigned Standard Slope		LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
Open Flor				 Mcfd @ 14.	65 peia		Deliverab				Mcfd @ 14.65 psi	a	
		ignec	d authority. o			states that h			o make th		ort and that he ha	-	
		-	•	aid report is true				_	day of A		-Unn 1	, 20 14	
			Witness (if any)			-		U	Im KC	Company Company	Receiv KANSAS CORPORATIO	
			For Comm	nission	<u> </u>		-			Che	ocked by	OCT 2 2	

	er penalty of perjury under the laws of the state of Kansas that I am authorized to request er Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO., LLC							
	oing 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							
• •	llation and/or upon type of completion or upon use being made of the gas well herein named.							
I hereby reque	est a one-year exemption from open flow testing for theELLIS G-4							
gas well on the gro	ounds 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							
\checkmark	is not capable of producing at a daily rate in excess of 250 mcf/D							
_	to supply to the best of my ability any and all supporting documents deemed by Commission to corroborate this claim for exemption from testing.							
Date: 08/14/14								
	Signature: Win & Hallagh 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.

 0.5 ± 0.00