KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruct	tions on Rev	erse Side	?)					
_ :	en Flov liverabi				Test Date					No. 15	0000			
Company	/			, , , , , , , , , , , , , , , , , , , ,	10/29/1	4	Lease LUCAS		187	'-20,978 ~			Well Nur	nber
County STANTON		Location E/2 NW		Section 21		TWP 30S		RNG (E/W) 41W		·		Acres Attributed		
Field BEAUC		IP		•	Reservoi	r RROW				nering Conn	ection		KOO	
Completic 12/17/0	on Date					k Total Dept	th		Packer S	et at			NCC.	WICH
Casing S 1.5			Weigh	ht Internal Diameter Set at Perforation				To FAOS'	ne (,	2 2014				
F.5 Tubing Si 2 3/8"	ize			<u> </u>	Internal Diameter 1.995		Set at 5098			ations	•	MCC WING DEC 12 2 5096' RECEIV		EIVED
Type Con	•	•	scribe)			d Production				it or Traveling			/ No	
Producing	g Thru		ulus / Tubing)		Carbon Dioxi	de		% Nitrog	en		Gas Gr	ravity - G	9
ANNUL Vertical D)				Press	sure Taps	-				(Meter	Run) (Pr	over) Size
			10/2	28	14 8	AM		10	1/29		14 8	3 AM		
Pressure Well on L			snut in	20			(AM) (PM)			20				
				2.									24	
Static /	Orific	ce l	Circle one:	Pressure	Flowing	OBSERVE Well Head	D SURFACE Casi	ng	ľ	ubing	Duration o		in Hou	
Dynamic Property	Size (inche	- 1	Meter Prover Pressu psig (Pm)	Differential in Inches H ₂ 0	Temperature t t (P_w) or (P_1) or (P_c) (P_w) or (P_1) or (P_c) (P_w) or (P_1) or (P_c) psig psia psig psia		Duration (Hours)		Liquid Produced (Barrels)					
Shut-In	·						52	pui	Paig	Pou	24			
Flow					-1									
-						FLOW STR	EAM ATTRI	BUTES						
Plate Coeffiec (F _b) (F Mcfd	ient		Circle one: Meter or ver Pressure psia	Press Extension ✓ P _m x h	Grav Fac F	tor	Flowing Femperature Factor F ₁₁	Fa	iation ctor :	Metered Flov R (Mcfd)	- 1	(Cubic Feet/ Gra		Flowing Fluid Gravity G _m
P_)2 ==		_:	(P _w) ² =	:	(OPEN FL		ERABILITY) % (P.	CALCUL - 14.4) +		:		(P _a) (P _d)	0.20)7
$(P_c)^2 - (P_c)^2 - (P_c$	P _a) ²	(P	_c) ² - (P _w) ²	Choose formula 1 or 2: 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ fivided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2. and divide	P _c ² - P _w ²	Slop Ass	sure Curve e = "n" origned rd Slope	n v I	og	·Antilo		Ope Deliv Equals	en Flow rerability R x Antilog Mcfd)
					<u> </u>	<u>-</u>								
Open Flo				Mcfd @ 14.0		 · · · -	Deliverabi				Mcfd @ 14		-	<u> </u>
		_	-	behalf of the	, .				o make the day of Do	•	ort and tha	it he ha		edge of 0
			Witness (if	any)			_	10	WM_	Jeff.	Company			
			For Comm	ssion			_			Che	cked by			

I declare under penalty of perjury under the laws of the exempt status under Rule K.A.R. 82-3-304 on behalf of the open and that the foregoing pressure information and statement correct to the best of my knowledge and belief based upon a of equipment installation and/or upon type of completion or under the laws of th	perator Berexco LLC s contained on this application form are true and available production summaries and lease records pon use being made of the gas well herein named.
gas well on the grounds that said well:	KCC WICHITA
is a coalbed methane producer is cycled on plunger lift due to water is a source of natural gas for injection int is on vacuum at the present time; KCC ap is not capable of producing at a daily rat I further agree to supply to the best of my ability any an estaff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the best of the staff as necessary to corroborate this claim for exemption for the staff as necessary to corroborate this claim for exemption for the staff as necessary to corroborate this claim for exemption for the staff as necessary to corroborate this claim for exemption for the staff as necessary the staff as necessary to corroborate this claim for exemption for the staff as necessary the staff as nece	oproval Docket Noe in excess of 250 mcf/D d all supporting documents deemed by Commission
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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.