KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	i:		100		6	See Instruci	tions on Rev	erse Side)					
□ Ор	en Flov	v 🏻	ÍOT		T D				4 DI	No. 15				
	liverabi				Test Date 6/30/14	1:				1-20345-00 2	0			
Company	/ od Re:	soui	rces, Inc.				Lease Toplff					1-27	Well Nu	mber
County Shermar			Location SESW/4		Section 27		TWP 8S		RNG (E.	/W)			Acres A 80	ttributed
Field Goodand	d				Reservoir Niobrara					thering Conn Systems In		_		
Completic 7-23-200		9		·	Plug Back	k Total Dept	th		Packer \$	Set at			-	
Casing Si 4 1/2"			Weight 10.5#		Internal E 4.052	Diameter	Set a 1310		Perfo	orations 2'		To 1124'		<u>. </u>
Tubing Si	ize		Weight		Internal D	Diameter				Perforations		То		
Type Con Single (Type Flui	d Production	n		Pump Ui	nit or Traveling	Plunger	? Yes	No	<u>.</u>
Producing	g Thru		ulus / Tubing)		arbon Dioxi	de		% Nitrog	 _		Gas Gra	avity - G	g
Annulus												.6	7. m) (D=	over) Cine
Vertical D	epth(H)				Pres Flan	sure Taps ge		_			2"	Run) (Pr	over) Size
Pressure	Buildu		Shut in 6-2		0_14 at 1		_			20			(AM) (PM)
Well on L	.ine: _		Started 6-30	2	o <u>14</u> at <u>1</u>	1:25	(PM)	Taken <u>7-</u>	1	20	14 at	12:05	(AM)(PM)
	i		-	-	_	OBSERVE	D SURFACE		-		Duration	of Shut-	<u>10 24 in 24 </u>	Hours
Static / Orifice Dynamic Size Property (inches		Meter Prover Pressure		Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P ₁) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In		_	P3.9 (1 III)	mishes H ₂ s			psig 8	22.4	psig	psia				
Flow							3 _	17.4		<u> </u>	24		0	
		_				FLOW STF	REAM ATTRI	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 _{ft}	Fa	iation ctor	Metered Flor R (Mcfd)	w	GOR (Cubic Fe- Barrel)	et/	Flowing Fluid Gravity G _m
					_		_			14				
			(=)0				ERABILITY)						² = 0.2	07
(P _c)² =		_:_	(P _w)² ≃.	Choose formula 1 or 2	P _d =			_c - 14.4) +			· ·		² =	_ _
(P _c) ² - (I or (P _c) ² - (I	P _e) ²	(F	P _c) ² - (P _w) ²	1. P _c ² -P _q ² 2. P _c ² -P _d ²	LOG of formula 1. or 2.		Slop	ssure Curve e = "n" or signed	n x	LOG	An	tilog	Deli Equals	en Flow verability R x Antilog
, e/ - (i	· a/	-		divided by: P _c ² -P _w	and divide by:	P _c ² -P _w ²		ard Slope			_		-	Mcfd)
 					-			_	_	_	!			
Open Flo	w			Mcfd @ 14	.65 psia		Deliverab	ility			Mcfd @	14.65 ps	ia	
			•	behalf of the							ort and t	hat he ha		
the facts s	stated ti	nerei	in, and that sa	id report is tru	e and correc	t. Executed	this the 21		day of _	December	in n		, ;	20 <u>14</u> .
			Witness (i	f any)						rull For	///// Company	ulu	uy	i
			50	ionian		FE	B 23 2	015		Chr	ecked by			 -
			For Comm	ISSION						Che	cked by			

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	er penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt status und	ler Rule K.A.R. 82-3-304 on behalf of the operator Rosewood Resources, Inc.
and that the foreg	poing pressure information and statements contained on this application form are true and
correct to the best	t of my knowledge and belief based upon available production summaries and lease records
of equipment insta	allation 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 the
	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
✓	is not capable of producing at a daily rate in excess of 250 mcf/D
I further agree	e to supply to the best of my ability any and all supporting documents deemed by Commission
staff as necessar,	y to corroborate this claim for exemption from testing.
Date: 12/21/14	
Jale: <u>12/2 (/ 14</u>	
	KCC WICH Signature: Janual Matury
	FEB 2 3 2015 Title: Production Assistant
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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.

W430 Topliff 1-27 South Goodland Goodland None June-14

	Casing				HRS	REMARKS
DATE	PSI	STATIC	MCF		DOWN	(Maximum length 110 characters)
6/1/2014		16		14	0	
6/2/2014	3	16		14	0	
6/3/2014	3	16		14	0	
6/4/2014	3	16		14	0	
6/5/2014	3	16		14	0	
6/6/2014	3	16		14	0	
6/7/2014	3	16		14	0	
6/8/2014	.3	16		14	0	
6/9/2014	3	16		14	0	
6/10/2014	3	16		14	0	
6/11/2014	3	16		14	3,5	
6/12/2014	3	16		14	0	
6/13/2014	3	16		14	0	
6/14/2014	3	16		14	0	
6/15/2014	3	16		14	0	
6/16/2014	3	16		14	0	
6/17/2014	3	16		14	0	
6/18/2014	3	16		14	0	
6/19/2014	3	16		14	0	
6/20/2014	3	16		14	0	
6/21/2014	3	16		14	0	
6/22/2014	3	16		14	0	
6/23/2014	3	16		14	0	
6/24/2014	3	16		14	0	
6/25/2014	3	16		14	0	
6/26/2014	3	16		14	0	
6/27/2014	3	16		14	0	
6/28/2014	3	16		14	0	
6/29/2014	3	16		2	21	
6/30/2014	8	21		0	24	
7/1/2014					0	

Total 394

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W430 Topliff 1-27 South Goodland Goodland None July-14

, , , ,

	Casing		I	HRS	REMARKS
DATE	PSI	STATIC N	ICF I	DOWN	(Maximum length 110 characters)
7/1/2014	7	20	8	8	
7/2/2014	5	18	15	0	
7/3/2014	3	16	15	0	
7/4/2014	3	16	15	0	
7/5/2014	3	16	15	0	
7/6/2014	3	16	15	0	
7/7/2014	3	16	15	0	
7/8/2014	3		15	0	
7/9/2014	3	16	15	0	
7/10/2014	3		14	0	
7/11/2014	3		14	0	
7/12/2014	3		14	0	
7/13/2014	3		14	0	
7/14/2014	3	16	14	0	
7/15/2014	3		14	0	
7/16/2014	2	15	16	0	
7/17/2014	2	15	17	0	
7/18/2014	3	16	14	0	
7/19/2014	3	16	14	0	
7/20/2014	3		14	0	
7/21/2014	3		14	0	
7/22/2014	3		14	0	
7/23/2014	3		14	0	
7/24/2014	3		14	0	
7/25/2014	3		14	0	
7/26/2014	3		14	0	
7/27/2014	3		14	0	
7/28/2014	3		14	0	
7/29/2014	3		14	0	
7/30/2014	3		14	0	
7/31/2014	3	16	14	0	

Total 441

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W430 Topliff 1-27 South Goodland Goodland None August-14

	Casing			HRS	REMARKS
DATE	PSI	STATIC	MCF	DOWN	(Maximum length 110 characters)
8/1/2014	3	16	14	0	
8/2/2014	3	16	14	0	
8/3/2014	3	16	14	0	
8/4/2014	3	16	14	0	
8/5/2014	3	16	14	0	
8/6/2014	3	16	14	0	
8/7/2014	3	16	14	0	
8/8/2014	3	16	14	0	
8/9/2014	3	16	14	3	
8/10/2014	3	16	14	0	
8/11/2014	3	16	14	0	
8/12/2014	3	16	14	0	
8/13/2014	3	16	14	0	
8/14/2014	3	16	14	0	
8/15/2014	3	16	14	0	
8/16/2014	3	16	14	0	
8/17/2014	3	16	14	0	
8/18/2014	3	16	14	0	
8/19/2014	3	16	14	0	
8/20/2014	3	16	14	0	
8/21/2014	3	16	14	0	
8/22/2014	3	16	14	0	
8/23/2014	3	16	14	0	
8/24/2014	3	16	14	0	
8/25/2014	3	16	14	0	
8/26/2014	3	16	14	0	
8/27/2014	3	16	14	0	
8/28/2014	3	16	14	0	
8/29/2014	3	16	14	0	
8/30/2014	3	16	14	0	
8/31/2014	3	16	14	0	

Total 434

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