Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	t:			(See Instruct	tions on Re	verse Side	<i>)</i>					
□ Ор	en Flow	•		Test Date:				ADI I	No. 15				
✓ Deliverability					06-30-2015				API No. 15 033-21321 – <i>0000</i>				
Company REDLAND RESOURCES, LLC					Lease BALLET			Well Number #11-3					
County Location COMANCHE NW NW			Section 11		TWP 35S		RNG (E/W) 16W		Acres Attributed 320				
Field AETNA GAS AREA					Reservoir MISSISSIPPIAN				Gas Gathering Connection ATLAS GAS PIPELINE				
Completion 08-10-2		1	_	Plug Back Total Depth 5407'				Packer Set at N/A					
Casing S 4.5"	ize	-	Weight 10.50#		Internal Diameter 3.927"		Set at 5449 '		ations	To 5322'			
Tubing Si 2.375"	ize			Internal [1.995"	Diameter	Set at 5247'		Perforations		То			
Type Completion (Describe) SINGLE ZONE				Type Flui	Type Fluid Production CRUDE OIL/ SALT WATER				Pump Unit or Traveling Plunger? Yes / No PUMPING UNIT				
Producing Thru (Annulus / Tubing) TUBING				% Carbon Dioxide				% Nitrogen Gas Gravity - G			avity - G _q	_	
Vertical D					Pres	sure Taps				(Meter	Run) (Prov	er) Size	
Pressure	Buildup	: Shut in	-30 ₂	15 at 1:	:45PM	(AM) (PM)	Taken 07	7-01-	20	15 at 1:45PM	<u>√</u> (AN	1) (PM)	
Well on L	ine:	Started	Started 20										
-					OBSERVE	D SURFAC	E DATA			Duration of Shut-	_{in} <u>ач</u>	Hours	
Static / Orifice Dynamic Size Property (inches)		Meter Prover Pres	Differential	Flowing Temperature		I Molihood Descours		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)		
		s) pslg (Pm) Inches H ₂ 0	t	t	psig 60	psia	psig 110	psia				
Flow		- 				00		110			-		
<u>. </u>				1	FLOW STR	LEAM ATTR	IBUTES	I	<u> </u>	<u> </u>			
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia	Press Extension P _m x h	Grav Fac F	or Temperatur		Fa	riation actor F _{pv}	Metered Flov R (Mcfd)	w GOR (Cubic Fe Barrel)	eet/	Flowing Fluid Gravity G _m	
/D \2 _		. (0.12		·	OW) (DELIV		•				² = 0.207		
(P _c) ² =	· I		Choose formula 1 or 2	P _d =				- 14.4 =	_ :	(P _d)	Τ		
$(P_{o})^{2} - (P_{a})^{2}$ or $(P_{o})^{2} - (P_{d})^{2}$		(P _c) ² - (P _w) ²	(P _c) ² - (P _w) ² 1. P _c ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _w ²		LOG of formula 1. or 2. and divide by:		Backpressure Curve Slope = "n" or Assigned Standard Slope		06	Antilog Deli Equals		Flow rability x Antilog :fd)	
				_								•	
Open Flo	w	_	Mcfd @ 14,	65 neia		Deliverat	nility			Mcfd @ 14.65 ps	<u> </u>		
		nod authority		•	etatos that b		_	n make sh		ort and that he ha			
			said report is trui							ort and that he ha		Ť.	
		_											
Witness (if any)					WCC WICHITA JUL 2-1 2015				For	For Company			
_		Fer Con	amission		- J U -	L 2-1 2	015		Che	cked by	_		
					F	RECEIV	ED						

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 REDLAND RESOURCES, 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 BALLET #11-3 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 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:
KCC WICHITA Signature: White CO-MANAGER JUL 2 1 2015 Title: CO-MANAGER RECEIVED

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.