KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST (See Instructions on Reverse Side)

Type Test	t:			((See Instruc	tions on He	verse Side))					
:	en Flow			Test Date	p•			ΔD1	No. 15				
√ De	liverabili	у		6/15/15)33-00030-0	00-01			
Company WOOLS		ERATING CO	//PANY, LLC			Lease YORK D)			1	Well N	Number	
County Location COMANCHE NW NW NE				Section 5		TWP 32 S		RNG (E/W) 16 W			Acres Attributed		
Field BAKER CANYON				Reservoir MISSISSIPPI				Gas Gathering Connection ATLAS			**CC W/ AUG 17 20 4961 RECEIVED		
Completion Date 12/21/09				Plug Back Total Depth 5251				Packer Set at NONE			AL	IK WILL	
	sing Size Weight 600 , 10.50			Internal Diameter 4.052		Set at 5251		Perforations 4912		To 49	161 1	7 20	
Tubing S 2:375	500 10.50 ping Size. Weight 375 4.70			Internal Diameter 1.995					Perforations OPEN			EIVEL	
Type Completion (Describe) SINGLE				Type Fluid Production GAS AND WATER			Pump Unit or Traveling Plunger? Yes / N PUMPING						
Producing ANNUL	Thru (Annulus / Tubing)	% C	Carbon Dioxi	ide		% Nitrogo	en	Ga	ıs Gravity -	G,	
Vertical D	epth(H)	-			Pres	sure Taps				(Me	eter Run) (Prover) Size	
Pressure	Buildup:	Shut in 6/15	5/15 ₂	0 at		(AM) (PM)	Taken 6/	16/15	20	at		(AM) (PM)	
Well on L	ine:	Started	2	0 at		(AM) (PM)	Taken		20	at		_(AM) (PM)	
	_				OBSERVE	D SURFACE	E DATA	·		Duration of	Shut-in	Hour	
Static / Orifice synamic Size roperty (inches)		Meter Prover Pressu	Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t		Casing Wellhead Pressure (P _w) or (P ₁) or (P _c) psig psia		Tubing Wellhead Pressure (P_w) or (P_1) or (P_c) psig psia		Duration (Hours)	Liq	uid Produced (Barrels)	
Shut-In	.625					1275	рана	0	рэіц	24		_	
Flow	_												
					FLOW STF	REAM ATTR	IBUTES	<u> </u>	<u> </u>				
Plate Coeffiecient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia Press Extension P _m x h		Gravity Factor F _p		Temperature Fa		viation Metered Flow actor R F _{pv} (Mofd)		v GOR (Cubic Feet/ Barrel)		Flowing Fluid Gravity G _m	
P _o)2 =		: (P _w) ² =	:	•	• •	'ERABILITY) % (P		.ATIONS :14.4 =	;		$(P_a)^2 = 0.$ $(P_d)^2 =$		
(P _c) ² - (I	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: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide	P.2-P.2	Backpressure Curve Slope = "n" or Assigned Standard Slope		n x LOG		Antilog	D	Open Flow Deliverability Equals R x Antilog (Mcfd)	
									_				
0			Maria O de or			Dell'es et l'ille		11-1		M-11 0 11	d @ 14.65 poio		
Open Flo	<u>w</u> _	-	Mcfd @ 14.	65 psia		Deliverab	ılıty			Mcfd @ 14.6	5 psia		
	_	ned authority, on orein, and that sa				•		day of Al	JGUST	rt and that h		wledge of _20 _15	
							42	. e	XION!	0			
		Witness (if	eny)			-		<u> </u>	- Trans	Сотралу			
		For Commi	ssion			_			Chec	ked by			

	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 YORK D-1
131	(Check one) is a coalbed methane producer RECEIVED 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: 8/5/15 Signature: Win R. Hallay Title: FIELD MGR.

Instructions:

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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.