KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:				((See Instruc	tions on Rev	verse Side	·)				
☐ O	en Flo	w			Test Date	a•			ΔDI	No. 15			
✓ De	liverab	ilty			9/30/15					007-22863-0	00-01		
Company WOOLSEY OPERATING COMPANY, LLC					Lease SHERRY			Y			1	Well Number	
County BARBEI			Locat W/2 S\		Section 32		TWP 32S		RNG (E 12W	/W)		Acres Attributed	
Field MEDICI	NE LO	DG	E-BOGGS	<u></u>	Reservoi				Gas Gas ATLAS	hering Conn	ection		
Completion Date 6/27/06					Plug Bac 4600	k Total Dep	th	-: -	Packer S NONE	Set at			
Casing S 4.500	ize		Weigh 10.50		Internal [4.052	Diameter	Set a 4600		Perfo	rations 0	то 3996	_	
Tubing S	ize		Weigh		Internal I	Diameter	Set a 4058	t	Perfo	rations EN	То		
Type Cor SINGLE		n (Di				d Production				nit or Traveling	Plunger? Yes	/ No	
Producin	g Thru	(Anı	nulus / Tubin			Carbon Dioxi	ide	% Nitrogen			Gas Gravity - G		
ANNUL				<u></u>									
Vertical D 3983	Pepth(F	ł)				Pres	sure Taps				(Meter F	lun) (Prover) Size	
Pressure	Buildu	p:	Shut in <u>9/2</u>	9/15	0 at		(AM) (PM)	Taken_9/	30/15	20	at	(AM) (PM)	
Well on L	.ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)	
	,					OBSERVE	D SURFACE	DATA			Duration of Shut-i	inHours	
Static / Oynamic Property	Orifi Siz (inch	0	Circle one: Meter Prover Pressi		Flowing Temperature t	Well Head Temperature t	Casi Wellhead ((P _w) or (P _i	Pressure	Wellhe	Tubing ad Pressure r (P ₁) or (P ₂)	Duration (Hours)	Liquid Produced (Barrels)	
Shut-in	.375		psig (Pm)	Inches H ₂ 0			psig 230	psia	psig 10	psia	24		
Flow	.070	_		_			1200	_					
			<u> </u>		<u> </u>	FLOW STR	REAM ATTRI	BUTES	·		<u> </u>	<u> </u>	
Plate Coefficcient (F _b) (F _p) Mcfd		Circle one: Meter or Prover Pressure psia		Press Extension P _m xh	xtension Factor		Flowing Temperature Factor F _{ft}	Deviation Factor F _{pv}		Metered Flow R (Mcfd)	v GOR (Cubic Fee Barrel)	Flowing Fluid Gravity G _m	
					(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P.)²	= 0.207	
(P _c) ² =		<u>_:</u>	(P _w) ² =		P _d =		% (P	<u>- 14.4)</u> +	14.4 =	:	(P _d) ²		
$(P_a)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _c) ² - (P _w) ²		1. P _a ² - P _a ² 2. P _c ² - P _d ² divided by: P _c ² - P _d ²	LOG of formula 1. or 2. and divide	P _c ² - P _w ²	Slop	Backpressure Curve- Slope = "n" or Assigned Standard Slope		LOG	Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)	
					1	<u> </u>	-		-				
_													
Open Flo	w			Mcfd @ 14.	65 psia		Deliverabi	lity			Mcfd @ 14.65 psi	a	
		-	•	n behalf of the					day of _C	CTOBER	ort and that he has	s knowledge of, 20	
			Witness (i	any)	KANSA	Receli Is corporati	ved ION COMMISSI	IN W	nR	Xerl For C	lay Company		
			For Comm	ission	_	0CT 1 1	6 2015 -			Chec	cked by		

CONSERVATION DIVISION WICHITA, KS

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 SHERRY 1 gas well on the grounds that said well:
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: 10/2/15 Signature:

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.

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