KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Re	verse Side)					
Op	en Flo	w			Test Date				ΛDI	No. 15				
✓ De	liverat	oilty			9/30/15	ŧ.				007-20845-0	00-00			
Company		PER	RATING CO	MPANY, LLC			Lease SEARS				1	Well N	ımber	
County Location BARBER N/2 NW NW				Section 32		TWP 32S			W)		Acres	Attributed		
Field MEDICII	NE LO	DDG	E-BOGGS		Reservoir MISSIS	r SIPPIAN			Gas Gat ATLAS	hering Conn	ection			
•	Completion Date Plug Back Total Depth Packer Set at 12/18/79 4544 NONE Casing Size Weight Internal Diameter Set at Perforations													
Casing S 4.500	ize	Weight 10.50			Internal Diameter 4.052			Set at 4531		Perforations 4513		то 4524		
Tubing Size 2.375		Weight 4.70		ıt	Internal Diar		eter Set at 4525		Perforations OPEN		То			
Type Con		n (D		· · · · · · · · · · · · · · · · · · ·		d Productio		-		nit or Traveling	Plunger? Yes	/ No		
Producing	g T hru	(Anı	nulus / Tubir	g)		arbon Diox	ide	% Nitrogen			Gas Gravity - G			
ANNUL Vertical D						Broo	sure Taps				(Major I	Bun C	rover) Size	
4518	epuiti	נר				FIES	sule laps				(JVIETOT I	nuii) (P	rover) Size	
Pressure	Buildu	ıp:	Shut in 9/2	9/15	0 at		(AM) (PM)	Taken_9/	30/15	20	at		(AM) (PM)	
Well on L					0 at		(AM) (PM)	Taken		20	at		(AM) (PM)	
						OBSERVE	D SURFACE	E DATA			Duration of Shut-	in	Hours	
Static / Dynamic	Orif Siz	te	Circle one: Meter Prover Press	Pressure Differential ure in	Flowing Temperature	Well Head Wellhead Pressure Wellhead Pressure Up No. (P. No. (Liquid Produced (Barrels)						
Property	(inch		psig (Pm)	Inches H ₂ 0	t	t	psig	psla	psig	psia			· ·	
Shut-In	.375						65		25		24	—		
Flow						ELOW STE	EAM ATTR			<u> </u>		<u> </u>	<u>_</u>	
Plate			Circle one:				Flowing	120123					Flowing	
Plate Coeffiecient (F _b) (F _o)		Meter or Prover Pressure		Press Extension	Grav Fact	tor	Temperature Factor	Fa	ation ctor	Metered Flov R	(Cubic Fe	et/	Fluid Gravity	
Mefd			psia	P _m xh	F		F _{ft}	F	pv	(Mcfd)	Barrel)		G,,,	
(P _c) ² =			(P _w)² =	: :	(OPEN FLO	7 7	'ERABILITY % (F) CALCUL ⁾ , - 14.4) +			(P _a)	² = 0.2	207	
		<u> </u>		Choose formula 1 or 2	:			ssure Curve				T	pen Flow	
(P _c) ² - (F		()) _c)²- (P _w)²	1. P _c ² -P _s ² 2. P _c ² -P _c ²	LOG of formula 1. or 2.			or	n x l	.OG	Antilog	De	iverability	
(P _c) ² - (F	J ₀)²			divided by: Pc2 - Pw	and divide by:	P.2 - P.2		signed ard Slope	_	_ [(Mcfd)	
					ļ									
					<u> </u>	_								
Open Flor	W			Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 psi	a		
		•	•				•			•	rt and that he ha		•	
the facts s	tated t	herei	n, and that s	aid report is true	and correc	_	I this the 2 ceived		day of O	CTOBER		 - •	₂₀ <u>15</u> .	
		·	Witness	lvne li	KA		CEIVEO RATION COMMI	SSOM	10	Villay	Company			
						OCT	1 6 2015							
			For Com:	nission	<u></u>	CONCEDUA				Chec	cked by			

exempt status und and that the fore correct to the bes of equipment inst I hereby requ	der penalty of perjury under the laws of the state of Kansas that I am authorized to request der Rule K.A.R. 82-3-304 on behalf of the operator WOOLSEY OPERATING CO, LLC going pressure information and statements contained on this application form are true and to fmy knowledge and belief based upon available production summaries and lease records allation and/or upon type of completion or upon use being made of the gas well herein named. est a one-year exemption from open flow testing for the SEARS 1 rounds 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 e to supply to the best of my ability any and all supporting documents deemed by Commission y to corroborate this claim for exemption from testing.
Date: <u>10/2/15</u>	Signature: Win L Hallang Title: FIELD MGR.

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.