KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test			O.1.2 .	5 5	(See Instruct	lons on Rev	erse Side)			
					Test Date: 10/1/15				API No. 15 15-007-23285-00-00			
Company WOOLSEY OPERATING COMPANY, LLC							Lease MONTG	OMERY			3	Well Number
County Location BARBER SW NW SE				Section 26			TWP RNG (E/W) . 33S 11W		N)		Acres Attributed	
Field RHODES SOUTH				Reservoir MISSIS			Gas Gathering C ATLAS			ection		
Completion Date 6/3/08				Plug Bac 4840	k Total Dept	h	Packer Set at NONE			-		
Casing Size Weight 4.500 10.50				Internal E 4.052	Diameter			Perfor 4543	ations	то 4624		
Tubing Si	Tubing Size Weight 2.375 4.70				Internal I 1.995	Diameter		Set at Perforations 4663 4663			то 4663	
Type Completion (Describe) SINGLE					Type Fluid Production WATER / OIL			Pump Un PUMP	it or Traveling	Plunger? Yes	/ No	
Producing Thru (Annulus / Tubing) ANNULUS				% C	% Carbon Dioxide			% Nitroge 1.403	en	Gas Gravity - G _g .634		
Vertical Depth(H) 4584				Pressure Taps FLANGE						(Meter F 2"	Run) (Prover) Size	
Pressure	Buildu	p: :	Shut in9/30	/15 2	0 at		(AM) (PM)	Taken_10)/1/15	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-	inHours
Static / Orifice Dynamic Size Property (inches		9	Circle one: Meter Prover Pressur psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P ₁) or (P _c) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration (Hours)	Liquid Produced (Barrels)
Shut-In	.500		F-10 (1)				110	psia	0	psia	24	
Flow												
						FLOW STR	EAM ATTRI	BUTES	ī		. 	
Plate Coefficeient (F _b) (F _p) Mofd			Circle one: Meler or ver Pressure psia	Press Extension P _m x h	Gravity Factor F _g		Temperature Fa		riation Metered Floractor R F _{pv} (Mcfd)		y GOR (Cubic Fe Barrel)	l Gravity I
			ļ		(ODEN EL			041 011	ATIONIC			
(P _c) ² =		,	(P _w)² =_		(OPEN FL		ERABILITY) % (P.	- 14.4) +		:	(P _a)	² = 0.207 ² =
(P _c) ² - (l		· (F	P _c) ² - (P _w) ²	1. P _c ² -P _d ² 2. P _c ² -P _d ² wided by: P _c ² -P _d ²	LOG of formula 1, or 2, and divide	P _c ² -P _w ²	Backpres Slop Ass	sure Curve = = "n" or gned rd Slope		og [Antilog	Open Flow Deliverability Equals R x Antilog (Mcfd)
_												
Open Flow Mcfd @ 14.65 psia						Deliverability			_	Mcfd @ 14.65 psia		
		_	d authority, on		and correc	t. Executed	this the 9		day of O	e above repo	ort and that he ha	as knowledge of, 20
			Witness (if	eny)	KANSAS	Received ORPORATION	d Commission	<u>Alm K</u>	<u>- (</u>	Yaka For (mpany	
			For Commis	sion	n	CT 16 1	2015 -			Che	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 MONTGOMERY 3 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: 10/9/15 Signature: Who Wallson 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.