KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

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Type Test	t:				(See Instruc	tions on Re	verse Side	<i>)</i>						
✓ Open Flow				Test Date:				A TO L	No. 15						
Deliverabilty					9/28/15				No. 15 20499-00-(01					
Company BEREXCO LLC						Lease EISELE							Well Number 2-17		
County Location HASKELL C NW SE				Section 17		TWP RNG (E 28N 32W		RNG (EA	V)	.,,,,,	Acres A	Attributed			
Field					Reservoir LANSING B			Gas Gath	ection						
Completion Date 3/1995 (RECOMP)				Plug Back Total Depth 5200				Packer Se NONE							
Casing S 5.5	Casing Size Weight 5.5 15.5				Internal E 5.012	Diameter	Set at 5749			Perforations 4225		To 4228			
Tubing Size Weight 2.875 6.5				t	Internal D 2.441	Diameter			Perfora N/A	Perforations N/A					
Type Completion (Describe) SINGLE GAS					Type Fluid Production OIL/WATER				Pump Uni PUMP	Plunger? Yes	/ No				
Producing Thru (Annulus / Tubing) CASING					% Carbon Dioxide				% Nitroge		Gas Gravity - G _g 0.710				
Vertical Depth(H) 4227					Pressure Taps FLANGE					(Meter 3.068		rover) Size			
			0 15 at 8	AM	(AM) (PM)	M) (PM) Taken 9/28		20	15 at 8 AM	(AM) (PM)				
Well on Line: Started			2	20 at (/			(PM) Taken 20			at	(AM) (PM)				
1						OBSERVE	D SURFACE	E DATA			Duration of Shut-	in 24	Hours		
Static / Dynamic Property	Dynamic Size		Circle one: Meter Prover Pressu		Flowing Well Heat		e Wellhead Pressure (P _w) or (P _t) or (P _c)		Tubing Wellhead Pressure (P _w) or (P _t) or (P _t)		Duration (Hours)		Liquid Produced (Barrels)		
Shut-In			psig (Pm)	Inches H ₂ 0			psig 180	psla	psig	psia	24	 			
Flow												 			
						FLOW STR	EAM ATTRI	BUTES							
Plate Coeffictient (F _b) (F _p) Mctd		Circle on Meter of Prover Pre		Press Extension ✓ P _m x h	Grav Fact	rity tor	Flowing		iation ctor pv	Metered Flov R (Mcfd)	y GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m		
					(OPEN FL) OW) (DELIV	ERABILITY)	CALCUL			(7)				
(P _c) ² =		_:	(P _w) ² =	Choose formula 1 or 2	P _d =	• •		' _c - 14.4) +			(P _d)	² = 0.2 ² =			
$(P_c)^2 - (P_g)^2$ or $(P_c)^2 - (P_d)^2$		(P _c) ² - (P _w) ²		1. P _c ² -P _s ² 2. P _c ² -P _d ² divided by: P _c ² -P _s ²	1. P _c ² -P _a ² LOG of formula 2. P _c ² -P _d ² 1. or 2. and divide		P _c ² -P _w Backpress Slope Assi Standar		n x L	ре	Antilog	Open F Delivera Equals R x (Mcf			
							 			_					
Open Flow				Mcfd @ 14.65 psia			Deliverability			Mcfd @ 14.65 psia					
The	undersi	gned	d authority, or	n behalf of the	Company, s	tates that h	e is duly au	thorized to	o make the	above repo	rt and that he ha	s know	ledge of		
the facts st	tated th	erei	n, and that sa	ald report is true	e and correc	t. Executed	this the 15	oth /	day of De	cember	•	,	₂₀ <u>15</u> .		
Witness (if any) KCC WICHITA For Company															
			Witness (i								Company				
			For Comm	ission		JAN	0.7 201	6		Chec	ked by	_			

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I declare under penalty of pegjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. &2-3-304 on behalf of the operator Berexco 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 Eisele #2-17 gas well on the grounds that said well:
(Check one) is a coalbed methane producer is cycled on plenger lift due to water is a source of ratural gas for injection into an oil reservoir undergoing ER is on vacuum æthe present time; KCC approval Docket No. is not capable ⊅f 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.
Nate: 12/15/15 KCC WICHITA Signature: A. A. P. Petroleum Engineer 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.