KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

| Type Test | : | | | | | (| See Instr | ucti | ions on Rev | erse S | ide |) | | | | | |
|---|---------|-------------------------------------|--|----------------------------------|---|---------------------|---|------------------------|------------------------------|---------------------|--|--------------------|---------------------|---------|-------------------|------------------------------|----------------------------|
| Op | en Flo | w | | | | Test Date | | | | | | A DI N | No. 15 | | • | | |
| √ Del | liverab | ilty | | | | Novemb | | 01 | 5 | | | | 33 - 12024 | 480C | 000 | | |
| Company Castelli | | ora | tion, Inc. | | | | | | Lease Einsel | D | | | | | #1 | Well Nu | mber |
| County Location Comanche NE NE NW | | | Section 12 | | | TWP 33S | | | RNG (E/W) 17W | | | Acres Attributed | | | | | |
| Field Shimer | | | Reservoir Mississippi | | | | Gas Ga Oneo | | | ering Conn | ection | 1 | | | | | |
| Completic 06/02/7 | | 0 | | | | Plug Bac | | epti | h | | | Packer Se | et at | | | | |
| Casing Size Weight 4 1/2" 10.5# | | | Internal Diameter | | | Set at 5083' | | | Perforations OH 5083-5120 | | | То | | | | | |
| Tubing Size Weight 2 3/8" | | | | Internal E | Set at 5060 | | | Perforations | | | То | | | | | | |
| Type Com | | | escribe) Open Ho | ole | | Type Flui | | tion | | | | Pump Uni Pumpir | t or Traveling | Plun | ger? Yes | / No | |
| | | | nulus / Tubin | | | | arbon Di | oxic | de | | | % Nitroge | - | | Gas Gr | avity - (| 3 ₀ |
| Annulus | | | | | | | | | | | | | | | | | <u> </u> |
| Vertical D | epth(H | 1) | | | | | Pr | ess | sure Taps | | | | | | (Meter I | Run) (P | rover) Size |
| Pressure | Buildu | p: - | Shut in No | ven | nber 🖆 2 | 0 15 at 8 | :00 | _ | (AM) (PM) | Taken | No | ovember | 12 20 | 15 | at 8:00 | (| (AM) (PM) |
| Well on Li | ine: | + | Started | | 20 | 0 at | | _ | (AM) (PM) | Taken . | | | 20 | | at | ! | (AM) (PM) |
| | | | _ | | | | OBSER | <u>V</u> EI | D_SURFACE | DATA | | | - | Dura | ition of Shut- | in | Hours |
| 1 | | rifice Circle one Meter Prover Pres | | Pressure Differential | | Flowing Well He | | I Mallhaari Draccura | | | Tubing Wellhead Pressure (P _w) or (P ₁) or (P ₆) | | Duration (Hours) | | | Liquid Produced (Barrels) | |
| Property | (inch | es) | psig (Pm) | | Inches H ₂ 0 | t | t | psig | | psia. | | psig | psia | | (riouis) | (Daileis) | |
| Shut-in | | | | | | | | | 625 | 639.4 | 1 | | 1 | | | | |
| Flow | | | _ | | | | | | | | | | | | - | | |
| | | | | | | | FLOW S | TR | EAM ATTRI | BUTES | <u> </u> | | | | | <u> </u> | |
| Plate | | | Circle one: | | Press | Grav | ditre | | Flowing | Τ. | ٦ | intina | Makazad Fla | | COR | | Flowing |
| Coeffiecient (F _b) (F _p) Mcfd | | Meter or Prover Pressure psia | | Extension √P _m x h | | Fac | tor | T | emperature Factor | ' | Fa | iation ctor | Metered Flow | | GOR (Cubic Fe | et/ | Fluid Gravity |
| | | | | | | F, | • | | F _{II} | | F _p , | | (Mcfd) | | Barrel) | | G _m |
| | | | | | | | | | | | | | | | | | |
| | | | | | | (OPEN FL | OW) (DEL | _1VI | ERABILITY) | CALC | UL | ATIONS | | | (P _a) | ²= 0.2 | .07 |
| (P _c) ² = | | _:_ | (P _w) ² | | : | P _d ≈ | | % | % (P | _c - 14.4 |) + | 14.4 = | : | , | (P _d) | | |
| (P,)2- (F | 2)2 | (F | P _c) ² - (P _w) ² | | se formula 1 or 2 . P _c - P _c 2 | LOG of | | 7 | Backpres | ssure Cu e = "n" | ırve | - 1 | Г٦ | | | | pen Flow |
| or (P_)2- (F | * | · | u, , , , , | | 2. P ₂ -P ₃ 2 | formula 1. or 2. | | | | or | | - nxL | og | | Antilog | L | lverability R x Antilog |
| (, 6) - (, | a' | | | divide | sd by: P _d - P _w | and divide by: | P _c ² - P _w ² | | • | ard Slop | е | | ل ا | | | | (Mcfd) |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| Open Flor | w | | | _ | Mcfd @ 14. | 65 psia | | | Deliverab | ility | | | | Mcfd | @ 14.65 ps | ia | |
| | | | d authority, on, and that s | | | | | | · · | | | o make the | • | ort an | d that he ha | | ledge of 20 16 . |
| inio Idulia S | iaieu l | 1918 | n, anu maí s | aiu I | eport is titl | | | | | | ー わ | uay or | <u> </u> | | | | د. <u></u> |
| | | | Witness | (if any | ·) | KCC | ? Wife | سره: • نا <u>م.</u> | :IIA _ | - | L | <u>~\</u> | ا (ست | Compa | у | | |
| | | | | | · | r r | 301 | 20 | (16 _ | | | | | | | | |
| | | | For Com | เกเรรเด | 11 | | اشان آھان | \$ 15 | TIT 1 | ~ | /. | -1/ | Che | cked by | , | | |

| I declare under pen | nalty of perjury under the laws of the state of Kansas that I am authorized to request | | | | | | | | | |
|-----------------------------|--|--|--|--|--|--|--|--|--|--|
| exempt status under Rul | le K.A.R. 82-3-304 on behalf of the operator Castelli Exploration, Inc. | | | | | | | | | |
| and that the foregoing p | 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. | | | | | | | | | |
| l hereby request a o | ne-year exemption from open flow testing for the | | | | | | | | | |
| gas well on the grounds | that said well: | | | | | | | | | |
| , | | | | | | | | | | |
| (Check one) | | | | | | | | | | |
| | 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 | | | | | | | | | |
| | vacuum at the present time; KCC approval Docket No. | | | | | | | | | |
| [√] is no | t capable of producing at a daily rate in excess of 250 mcf/D | | | | | | | | | |
| I further agree to su | upply to the best of my ability any and all supporting documents deemed by Commission | | | | | | | | | |
| _ | proborate this claim for exemption from testing. | | | | | | | | | |
| • | | | | | | | | | | |
| Date: January 21, 2016 | 3 | | | | | | | | | |
| Date, variation of 27, 2010 | ′ | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Signature: The Caux | | | | | | | | | |
| (< | CC WICHTA Title: President | | | | | | | | | |
| | TB 0 1 2016 | | | | | | | | | |
| ' | - 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.