KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:		10		(See Instruc	tions on Rev	erse Side	9)				
□ Op	en Flo	w E	\$SI										
	eliverat				Test Date 6/2/2015					No. 15 1-20414-00	000		
Company		esou	rces, Inc.				Lease Duell				41-29	Well Nu	mber
County Sherman	 n		Locati NENE		Section 29		TWP 7S		RNG (E 39W	(W)		Acres A	ttributed
Field Goodlan	nd				Reservoir Niobrara					thering Conn			
Completion 6/9/200		te			Plug Bac 1225'	k Total Dep	th		Packer	Set at			
Casing S			Weigh 10.5#		Internal D	Diameter	Set at 1225		Perfo	rations 2'	To 1072'		
Tubing S	ize		Weigh		Internal D	Diameter	Set at		Perfo	orations	То		
Type Con Single (Type Flui Dry Ga	d Productio	n		Pump U	nit or Traveling	Plunger? Yes	No	
	g Thru		nulus / Tubin	g)		arbon Diox	ide		% Nitrog		Gas Gr .6	avity - G),
Vertical D						Pres	sure Taps					Run) (Pi	over) Size
1230'		-,				Flan	•				2"		,
Pressure	Buildu	ıb:	Shut in 6-1		0_15 at_2	:30	(PM)	Taken 6-	2		15 at 2:40	(AM (PM)
Well on L	.ine:		Started 6-2	2	o 15 at 2	:40	(AM)(PM)	Taken 6-	3	20	15 at 3:30	(AM)(PM)
	1					OBSERVE	D SURFACE	_			Duration of Shut-	in_24	Hours
Static / Dynamic Property	Orif Siz (inch	20	Circle one: Meter Prover Presso		Flowing Temperature t	Well Head Temperature t	(P _w) or (P ₁	Pressure) or (P _c)	Wellhe	Tubing ead Pressure r (P _I) or (P _C)	Duration (Hours)		i Produced Barrels)
Shut-In			psig (Pm)	Inches H ₂ 0			psig	psia 36.4	psig	psia		_	
Flow							7	21.4			24		
						FLOW STE	REAM ATTRI	BUTES					
Plate Coeffiec (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F ₁₁	Fa	riation actor	Metered Flor R (Mcfd)	w GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
								Ţ <u></u>		22			
					•		/ERABILITY)					²= 0.2	07
(P _c) ² =		_:_	(P _w) ² =	Choose formula 1 or 2	P _d =		<u> </u>	, - 14.4) + -		 :_	(P _d)	<u></u>	
(P _c) ² - (I or (P _c) ² - (I		(F	P _c) ² - (P _w) ²	 P_c² - P_s² P_c² - P_d² divided by: P_c² - P_s² 	LOG of formula 1, or 2. and divide	P _c ² -P _w ²	Stop- Ass	sure Curve e ≈ "n" or igned ird Slope	l n x	LOG	Antilog	Deli	en Flow verability R x Antilog (Mcfd)
				amora uy. 1 c		<u></u>							
									<u> </u>				
Open Flo	w			Mcfd @ 14.	.65 psia		Deliverabi	lity			Mcfd @ 14.65 ps	ia	
		-	-						-	he above repo December	ort and that he ha		ledge of 20 15 .
ine facts s	stated i	ınere	ın, and that s	aid report is true					uay or		1 Min	11,	
			Witness ((if any)			(ICHITA	-	100	m mul For	Company	ur	/
			For Comr	mission		APR 0	7 2016 -	_		Che	cked by		

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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 Rosewood Resources, Inc. 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 Duell 41-29 gas well on the grounds that said well:
(Check one) 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: 12/22/15
KCC WICHITA Title: Production Assistant APR 07 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.

W2225
Duell 41-29
North Goodland
Goodland
None
June-15

	Casing			I	-IRS	REMARKS
DATE	PSI	STATIC	<u>M</u> CF	1	DOWN_	(Maximum length 110 characters)
6/1/2015	22	2 34	ļ	0	24	
6/2/2015	22	2 35	;	0	24	
6/3/2015	16	5 29)	38	0	
6/4/2015	14	27	7	38	0	
6/5/2015	12	2 25	;	34	0	
6/6/2015	13	. 24	1	31	0	
6/7/2015	10) 23	3	30	0	
6/8/2015	ģ	22	2	30	0	
6/9/2015	8	3 22	?	29	0	
6/10/2015	8	3 21		28	0	
6/11/2015	8	3 21		28	0	
6/12/2015	8	3 20	}	27	0	
6/13/2015	8	3 21		23	4	
6/14/2015	8	3 20)	26	0	
6/15/2015	8	3 20)	27	0	
6/16/2015	(5 20)	25	0	
6/17/2015	ť	5 20)	25	0	
6/18/2015	6	5 19)	26	0	
6/19/2015	6	5 19)	24	0	
6/20/2015	(5 20)	23	1	
6/21/2015	(5 19)	25	0	
6/22/2015	Ć	5 19)	24	0	
6/23/2015	ć	5 19)	24	0	
6/24/2015	ć	5 19)	23	0	bp
6/25/2015	6	5 20)	21	2	
6/26/2015	6	5 19)	24	0	
6/27/2015	ć	5 19)	24	0	
6/28/2015	ć	5 19)	24	0	
6/29/2015	ť	5 19)	24	0	
6/30/2015	(5 19)	24	0	
7/1/2015		C)	0	0	

Total 749

KCC WICHITA APR 07 2016 RECEIVED W2225

Dueil 41-29

North Goodland

Goodland

None

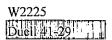
July-14

Total

	Casing			HRS		REMARKS
DATE	PSI	STATIC	MCF	DOV	VN	(Maximum length 110 characters)
7/1/2014	(5 19)	22	0	
7/2/2014	(5 19)	22	0	
7/3/2014	(5 19)	22	0	
7/4/2014	(5 19)	22	0	
7/5/2014	· ·	5 19)	22	0	
7/6/2014	(5 19)	22	0	
7/7/2014	(5 19)	23	0	
7/8/2014	(5 19)	22	0	
7/9/2014	(5 19)	22	0	
7/10/2014	(5 19)	22	0	
7/11/2014	(5 19)	22	0	
7/12/2014	(6 19)	22	0	
7/13/2014		6 19)	21	0	
7/14/2014	I	6 19)	21	0	
7/15/2014	•	7 20)	15	6	
7/16/2014	•	7 20)	20	0	
7/17/2014	•	7 20)	19	0	
7/18/2014	;	8 21	l	19	0	
7/19/2014	;	8 21	l	19	0	
7/20/2014	;	8 21	l	19	0	·
7/21/2014	•	8 2	l	18	1	
7/22/2014		8 2	l	20	0	
7/23/2014		8 2	l	16	3	
7/24/2014		8 2	l	21	0	
7/25/2014		8 2		21	0	
7/26/2014		7 20)	21	0	
7/27/2014		7 20)	21	0	
7/28/2014		8 2	I	14	9	
7/29/2014		8 2	l	23	0	
7/30/2014	,	7 20)	22	0	
7/31/2014		7 20)	22	I	

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North Goodland

Goodland

None

August-14

	Casing			HRS		REMARKS
DATE	PSI	STATIC	MCF	DOWN		(Maximum length 110 characters)
8/1/2014		7	20	22	2	
8/2/2014		7	20	22	0	
8/3/2014		7	20	22	0	
8/4/2014		7	20	22	0	
8/5/2014		7	20	22	0	
8/6/2014		7	20	22	0	
8/7/2014		7	20	22	0	
8/8/2014		7	20	22	0	
8/9/2014		7	20	22	0	
8/10/2014		7	20	22	0	
8/11/2014		6	19	22	0	
8/12/2014		6	19	22	0	
8/13/2014		6	19	22	0	
8/14/2014		6	19	22	0	
8/15/2014		6	19	22	0	
8/16/2014		6	19	22	0	
8/17/2014		6	19	22	0	
8/18/2014		6	19	22	0	
8/19/2014		6	19	22	0	
8/20/2014		6	19	22	0	
8/21/2014		6	19	22	0	
8/22/2014		6	19	22	0	
8/23/2014		6	19	22	0	
8/24/2014		6	19	22	0	
8/25/2014		6	19	22	0	
8/26/2014		6	19	22	0	
8/27/2014		6	19	22	0	
8/28/2014		6	19	22	0	
8/29/2014		6	19	22	0	
8/30/2014		6	19	22	0	
8/31/2014		6	19	22	0	

Total 682

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