

Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Tes	st:				(See Instru	ctions on Re	everse Side)				
	pen Flo eliverab	N 🛭 SHUT Pres	SURE	Test Dat	e: -2 -9	'C'		AP	I No. 15 - /0]	3 - 20,59	9-00	0.00
Compan	-	it Rosnue	ores Tax			Lease HEIN		<u></u>		#.	Well Nu	ımber
MONUMENT RESOURCES INC. County Location LEAUEN WORTH NW NWNE			Section 19	Section TWP			RNG (E/W) 22 E			Acres Attributed		
Field	_			Reservo Mc Lou 7	. /	urg =s	S	_	thering Connec	tion SMISSION	Ca	R POLATIO
Completi	ion Date フユータ				k Total Dept		-	Packer				
Casing Size Weight			Internal (Internal Diameter Set at /3//			Perf	orations // @	60' - 11	69'		
Tubing S	ize	Weig		Internal (Diameter	Set		Perf	orations	То		
	mpletion GAS	(Describe)			id Production	n		-Pump U	Init or Traveling	Plunger? Yes	(No)	
Producing Thru (Annulus / Tubing)			% Carbo	% Carbon Dioxide			% Nitrogen		Gas Gravity - G _g			
Vertical D		ING 167				ure Taps	-					over) Size
Pressure			19	at		(AM) (PM)	Taken		10		2 11 .	AM) (PM)\
Well on L	·		19								`.	AM) (PM)
					OBSERVE	D SURFAC	E DATA 2/	7		Duration of Shut-	in_29	Hours
Static / Dynamic Property	Size Meter or Different inches		Pressure Differential in (h) Inches H,0	Flowing Well Head Temperature t t		Casing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _c) psig psia		Duration Liquid Pro		
Shut-In						10		poig	para	24		
Flow									_ļ	· · · · · · · · · · · · · · · · · · ·		
				т	FLOW STR	EAM ATTR	IBUTES				—т	
Plate Coeffiecto (F _b) (F _p Mcfd	ent ,)	Circle one: Meter or Prover Pressure psia	Press Extension √P _m x H _w	Gravity Factor F _g		Flowing femperature Factor F ₁₁	Deviation Factor F _{pv}		Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m
				(OPEN FLO	OW) (DELIV	ERABILITY) CALCULA	TIONS				
(P _c)² =		: (P _w) ² =		P _d =			° _c - 14.4) +		<u> </u>	(P _a) ²	= 0.20)7
(P _e) ² - (P _e)	•	(P _c) ² - (P _w) ²	1. P _c ² - P _c ² 2. P _c ² - P _c ² divided by: P _c ² - P _c ²	LOG of formula 1. or 2. and divide by:	P. 2 . P. 2	Backpressure Curve Slope = "n" or Assigned Standard Slope		n x LOG		Antiloa De		en Flow verability R.x Antilog Mcfd
		1011	,									
											··.	
Open Flow	· ·		Mcfd @ 14.65	5 psia	.:	Deliverabil	ity		Mo	fd @ 14.65 psia		
			behalf of the Co			duly author	day of	N Fo	ove report and the over the beautiful to the contract of the c	er_	edge of	the facts
		For Comm				_	Presi	DUR	Checke			
									Unecke	u √y		

I declare under penalty or perjury under the laws of the state of Kansa exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Monut	IMBRIT RESOURCES, INC.
and that the foregoing information and statements contained on this application	
the best of my knowledge and belief based upon gas production records a	and records of equipment installa-
tion and/or of type completion or upon use of the gas well herein named.	
I hereby request a permanent exemption from open flow testing for the	CIHEIM #6
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 reserve	
is on vacuum at the present time; KCC approval Docket	
is incapable of producing at a daily rate in excess of 150	0 mcf/D
Date: 11-9-99	
oute	•
	·
Signature:	oust
Title: President	e de la companya de l
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I form on file with the conservation division. If a gas well meets 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 obtain a testing exemption.

At some point during the succeeding calendar year, wellhead shut-in pressure shall be 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.

The G-2 form conveying the newest shut-in pressure reading shall be filed with the Wichita office no later than thirty (30) days after the taking of the pressure reading. The form must be signed and dated on the front side as though it was a verified report of test results.