## KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

-OFIVE	r
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Type Test:				(	(See Instr	ructions on F	leverse Sid	ie)			1 A	
Oper	n Flow	X Shut-	-in		• •		-			_	DEC 2 n 21 حد	
	erabilty	Press		Test Date:	: 12-(	07 <b>-</b> 04 		Al	PI No. 15 -10	3−20 <b>,</b> 830 <b>ರ್</b>	KCC WICH	
Company	mon+	Degen				Lease					Well Number	
County	THEIT C		es. Inc.	0		Kraft					#1	
County Location Leavenworth NW,NE,NE			Section 11		TWP 10S		RNG			Acres Attributed		
ield			,,,, <u>,</u>	Reservoir		103			22E		40	
Fair	mount	:		Upper	McLou:	th			athering Conn 7 Transmi	ection Ssion Corp	oration	
ompletion		· · · · · · · · · · · · · · · · · · ·		Plug Back			<del></del> -		Set at	SSIGI COLL	Macron	
4/29/87				1100'			N/A					
Casing Size Weight			Internal Di	ameter	Set at		Perforations		To			
4 1/2" 15.5#					1193'		10		078' <b>-</b> 108	32'		
ubing Size 3/3		Weig	. 7#	Internal Dia	ameter	Set at 1070 '		Per	forations	То		
pe Compl			• /#	Type Fluid	Danduntia		/0'					
Gas	`			Water	_	on			Unit or Travelin	g Plunger? Yes	/ No	
oducing i Annu		nulus / Tubing	3)	% Carbon Nil	Dioxide			% Nitrogen Ga			Gravity - G	
rtical Dep				1477		<del></del>		Ni ———	. <u> </u>			
1082	1				Pres	sure Taps				(Meter	Run) (Prover) Size	
essure Bu	ildun:	Shut in 1	2-06 0	2004 at 8 •	10	/ A B 435/770040		12 0			(AM) ( <b>NE)</b> C	
ll on Line	:	Started	1:	9at		_ (AM) (PM)	Taken		19	at	(AM) (PM)	
<del></del>	<del></del>		·		OBSERV	ED SURFAC	E DATA			Duration of Shu	t-in Hours	
1	Orifice Circle one: Pressure Meter or Differential		Flowing Well Head		Casing			Tubing		Tiodic		
	Size oches	ches Prover Pressure in (h) Inches H <sub>2</sub> 0		Temperature Temperature		Wellhead Pressure (P <sub>w</sub> ) or (P <sub>1</sub> ) or (P <sub>c</sub> ) psig psia			ead Pressure or (P <sub>r</sub> ) or (P <sub>r</sub> )	Duration (House)	Liquid Produced	
porty   "	icies							psig	or (F <sub>1</sub> ) or (F <sub>2</sub> )	(Hours)	(Barrels)	
tut-In						10				24		
low						<del> </del>	<u> </u>	<del> </del>		24		
		•			<del></del>	<u></u>	<u> </u>			······································		
Plate	1	Circle one:		F	LOW ST	REAM ATTR	IBUTES			<del></del>		
Plate   Circle one:   Press   Coefficient   Meter or   Extension			Gravity	·	Flowing Devia		iation	Metered Flow	GOR	Flowing		
		Prover Pressure		Factor F <sub>g</sub>		Factor	Factor		R	(Cubic F		
						F <sub>it</sub> F <sub>pv</sub>		pv	(Mcfd)	Barret	G G	
	<u> </u>											
		-		(OPEN FLOW	/) (DELIV	ERABILITY	CALCUI	PADITA	<u> </u>	<u> </u>		
<u></u>	:	(P_)² =_	<u> </u>	P <sub>d</sub> =			14.4) +				)2 = 0.207	
12 (5.11	/5		Choose formula 1 or 2;				sure Curve	<del></del>	·	(P <sub>a</sub> )	<u></u> -	
or Or	- 1		LOG of formula	- 1	Slope = "n"		пх			Open Flow		
or (P <sub>d</sub> )2 - (P <sub>d</sub> )2	1	2. P.2. P.2		1. or 2. and divide pr. pr		Assigned		" ^		Antilog	Deliverability Equals R x Antilog	
	<del> </del>	d.	wided by: P2 P2	by:			rd Slope				Mold	
											<del>  </del>	
										<del></del>	<del>  </del>	
en Flow McId @ 14.65 psia				Dolivorabilit								
				<del></del>		Deliverabilit	<del></del>	<del></del> -		cfd @ 14.65 psia		
ine under	signed a	ulhority, on b	ehalf of the Cor	npany, states (	lhat he is	duly authoria	zed to mak	e the abo	ove report and t	hat he has know	ledge of the facts	
l therein, a	nd that :	said report is	true and correc	t. Executed th	is the	13th	day of .		December			
								n B	P	#	, <del>1</del> 9 <u>v3</u>	
		Witness (if a	ny)			_	((	21	tous	$\mathcal{O}_{\perp}$		
_		, -							For Co	трепу	<del></del>	
		For Commiss	sion		<del></del> -	_	Pr	eside	nt		<del></del>	
									Ch	- L		

I declare under penalty or 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 <u>Monument Resources</u> , <u>Inc.</u> and that the foregoing information and statements contained on this application form are true and correct to the best of my knowledge and belief based upon gas production records and records of equipment installation 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 <u>Kraft #1</u> 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.  X is incapable of producing at a daily rate in excess of 150 mcf/D
Date: December 13, 2004
Signature: <u>GM Fourt</u> Title: <u>President</u>

## Instructions:

All active gas wells must have at least an original G-2 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.