KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	st:					(See Instruc	tions on Re	everse Side	9)					
□ o _i	pen Flo	w			Test Dat	۸.			A 17	I No. 15				
D4	eliveral	bilty		1	/	e: -in pressure	11-15-11			I No. 15)3-20, 450 ~	$\Omega\Omega\Omega$			
Compan		esou	irces, Inc				Lease C. Heir	··			#5	Well Nu	mber	
County Location Leavenworth SE, SE, SE				Section 19		TWP 8S		RNG (E/W) 22E		Acres Attributed		ttributed		
Field				<u></u>	Reservol McLout	-				thering Conr	ection Corporation			
Completion Date 8/1/86					Plug Bac 1100'	Plug Back Total Depti 1100'		Packer Se			· · · · · · · · · · · · · · · · · · ·			
Casing Size 4 1/2"			Weight 9.5#		Internal Diameter		Set at 1254'		Perforations 1050'		то 1056'			
Tubing Size 2 3/8"			Weigh 4.7#	t	Internal Diameter		Set at 1050'		Perforations		То			
Type Completion (Describe) Type Fluid Production Single Gas Pump Unit or Trave Pump						,	Plunger? Yes	/ No						
Producin Casing	_	(An	nulus / Tubing	<u>;)</u>	% (Carbon Dioxi	de		% Nitro		Gas Gr	avity - G	i _a	
Vertical C		H)				Pres	sure Taps				(Meter F	Run) (Pr	over) Size	
Pressure	Bulldu	 .p:	Shut in 11-	14 2	11 at 9	:00am	(AM) (PM)	Taken_11	I-15	20	11 at 9:20 at	m (/	 AM) (PM)	
Well on L	_ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(/	AM) (PM)	
	·			·· -· · · ·		OBSERVE	D SURFAC	E DATA	··		Duration of Shut-	n_24	Hours	
Static / Orli Dynamic Siz Property (inch		8	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential re in Inches H ₂ 0	Temperature Temperatu		Casing Wellhead Pressure (P _w) or (P ₁) or (P _E) psig psia		Tubing Wellhead Pressure (P _w) or (P _t) or (P _e) psig psia		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In				_	_		185		-	-	24			
Flow														
Γ	1				-	FLOW STR		IBUTES						
Plate Coefficient (F _b) (F _p) Motd		Pro	Circle ons: Mater or over Pressure psia	Press Extension Pmxh	Gravity Factor F _g		Flowing Temperature Factor F ₁₁		lation ctor pv	Metered Flow R (McId)	w GOR (Cubic Fed Barrel)	nt/	Flowing Fluid Gravity G	
					(OPEN EL	OW) (DELIV	EDABUITY		ATIONE			Į.		
(P _e) ² =		_:_	(P _w) ² =		P _d =	9		P _e - 14.4) +		:	(P _a) ² (P _d) ²	= 0.20)7 	
(P _a) ² - (P _a) ² or (P _a) ² - (P _a) ²		(P _a) ² - (P _w) ²		Chaose formula 1 or 2 1. P _c ² · P _c ² 2. P _c ² - P _c ² divided by: P _c ² - P _c ²	1. P ² · P ² LOG of formula 2. P ² · P ² 1. or 2. and divide		Par Par As Stand		пх	roe	Antilog	Open Flow Deliverability Equals R x Antilog (Mold)		
Open Flo	l w			Mcfd @ 14.	65 psia		Deliverati	nitity			Mcfd @ 14.65 psi			
		1	d =b = -15- :					<u>-</u>						
				id report is true						ecember	ort and that he ha	, 2	0 11 .	
			Witness (I	anv)			_	C		Fou			IVED	
			For Commi				_				E C	EC (7 2011	

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 Monument 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 C. Heim #5
(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: December 1, 2011 Signature:

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.