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

Type Tes	t:				(	(See Instruc	tions on Re	everse Side	<del>)</del>			
Or	en Flo	W			Test Date	••			ADL	No. 15		
☐ De	eliverat	llty		V	_	in pressure	11-18-11			-21, 095 <i>~ (</i>	$\mathcal{C}(\mathcal{X})$	
Company		sou	rces, Inc		<del></del>	·	Lease C. Heir	n			13	Well Number
County Location Leavenworth N2, NW, NW				Section 30		TWP 8S			V)		Acres Attributed	
Field			·-		Reservoi McLout					ering Connect		
Completion Date 1/12/89				Plug Bac 1300'	Plug Back Total Depth 1300'			Packer Se	et at	•		
Casing Size Weight 4 1/2" 9.5#				Internal (	Diameter	Set at 1300'		Perforations 1186'-1194' and		то 1238'-	To 1238'-1244'	
Tubing S 2 3/8"	Tubing Size Weight 2 3/8" 4.7#				Internal I	Diameter		Set at 1254'		ations	То	
Type Completion (Describe) Single Gas				Type Flui Water	Type Fluid Production Water			Pump Unit or Traveling Plunger? Yes / No Pump				
Producing Thru (Annulus / Tubing) Annulus				% C	% Carbon Dioxide			% Nitroge	n	Gas Gr	avity - G <sub>g</sub>	
Vertical D		<del> </del>				Pres	sure Taps				(Meter I	Run) (Prover) Size
Pressure	Bulldu	p:	Shut in	7 2	0_11_at_9	:45am	(AM) (PM)	Taken_11	I-18	20	1 at 10:00	am(AM) (PM)
Well on L	lne:		Started	2	0 at		(AM) (PM)	Taken		20	at	(AM) (PM)
				7		OBSERVE	D SURFAC		1	7	uration of Shut-	in 24+ Hours
Static / Dynamic Property	Static / Orifice Dynamic Size Property (inches)		Circle one:  Meter Prover Pressur psig (Pm)	Pressure Differential in Inches H.O	Flowing Well Head Temperature t		Casing Welihead Pressure (P <sub>w</sub> ) or (P <sub>c</sub> ) psig psia		Tubing Wellhead Pressure $(P_w)$ or $(P_1)$ or $(P_2)$ psig psia		Ouration (Hours)	Liquid Produced (Barrels)
Shut-In			-		-		20	psie		<del>                                     </del>	24+	-
Flow	·						<u> </u>	<u> </u>			<u> </u>	
	- 1		ī		<del></del>	FLOW STF	REAM ATTE	RIBUTES			<del></del>	<del></del>
Plate Coefflec (F <sub>b</sub> ) (F Mcfd	lent ,)	Pro	Circle one: Mater or over Pressure psia	Press Extension ✓ P <sub>m</sub> x h	Grav Fac F	tor	Flowing Temperature Factor F <sub>11</sub>	Fa	lation ctor	Metered Flow R (Mcfd)	GOR (Cubic Fe Barrel)	Grandby (
				<u>.</u>	(OPEN FL	OW) (DELIV	ERABILITY	) CALCUL	ATIONS		(B.)	1- 0.207
(P <sub>e</sub> )2 =		_:	(P <sub>w</sub> ) <sup>2</sup> =_	:	P <sub>d</sub> =		% (	P <sub>e</sub> - 14.4) +	14.4 =	:	(P <sub>d</sub> )	<sup>2</sup> = 0.207 <sup>2</sup> =
(P <sub>e</sub> )*- (F	2)1	(F	°_)*- (P_)*	1. P <sup>2</sup> - P <sup>2</sup> 2. P <sup>2</sup> - P <sup>2</sup> Midded by: P <sup>2</sup> - P <sup>2</sup>	LOG of formula 1. or 2, and divide	P.2. P.2	Backpre Sid	ssure Curve pe = 'n" - or ssigned tard Slope	0.7.10	og [	Antilog	Open Flow Deliverability Equals R x Antilog (Mctd)
Open Flor	<u></u>			Mcfd @ 14.	65 psla		Deliveral	blity		Mo	ofd <b>@</b> 14.65 psi	<u> </u>
The t	unders	igned	authority, on	behalf of the	Company, s	tates that h	ne is dulv a	uthorized to	o make the	above report	and that he ha	as knowledge of
		_	n, and that sai				-		_	cember	1	, 20 11 .
	·		Witness (it	any)					Ly	ForCom	a)	RECEIVED
			For Commis	slon						Chacke	d by	DEC 0.7 20

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	re under penalty of perjury under the laws of the state of Kansas that I am authorized to request tus under Rule K.A.R. 82-3-304 on behalf of the operator Monument Resources, Inc
	e foregoing pressure information and statements contained on this application form are true and
correct to th	ne best of my knowledge and belief based upon available production summaries and lease records
	nt installation and/or upon type of completion or upon use being made of the gas well herein named. y request a one-year exemption from open flow testing for the <u>C. Heim #13</u>
	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
	r agree to supply to the best of my ability any and all supporting documents deemed by Commission
staff as nec	essary to corroborate this claim for exemption from testing.
Date: Dece	ember 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.