KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Tes	t:				(See Instruc	ctions on Re	verse Side))				
= '	en Flo eliverat				Test Date	e:				No. 15 023-20748-0	0-00		
Company FOUNDATION ENERGY MANAGEMENT,				LLC		Lease RUEB I	Lease RUEB FARM			Well Number 13-15			
County CHEYENNE			Local NWSV		Section 15		TWP 3S		RNG (E/W) 42W		Acres Attributed		ttributed
Field CHERR	Y CR	EEK			Reservoi			_		thering Conne	ection		
Completion 5/15/200		te			Plug Bac 1639'	k Total Der	oth		Packer	Set at			
Casing Size 7", 41/2"			Weigi 17#,		Internal Diameter 9-7/8", 6-1/4"		Set at 305', 1725'		Perforations 1558'		то 1595'		
Tubing Size 2-3/8"			Weigi 4.7#		Internal Diameter 1.995"		Set	Set at 1617'		rations	То		
Type Completion (D SINGLE (GAS)					Type Flui	Type Fluid Production				Pump Unit or Traveling P		Plunger? Yes / No	
	g Thru	<u> </u>	nulus / Tubin	g)	% C	arbon Diox	kide		% Nitrog	jen	Gas Gr	avity - G	, ,
Vertical D		H)				Pre	ssure Taps				(Meter F	Run) (Pi	rover) Size
Pressure	Buildu	1b:	Shut in3/1	72	14 at 2	:30 PM	(AM) (PM)	Taken	<u>.</u>	20	at	(AM) (PM)
Well on Line:			Started 3/1	tarted 3/18 20									
	-					OBSERV	ED SURFAC	E DATA			Duration of Shut-	_{in_} 24	Hours
Static / Orifice Dynamic Size Property (inches)		e	Circle one: Meter Prover Press psig (Pm)		Flowing Well H Temperature Temperat		Wellhead Pressure (P_w) or (P_l) or (P_c)		Tubing Wellhead Pressure (P_w) or (P_t) or (P_c)		Duration Liquid		i Produced Barrels)
Shut-In			pos (,	11101105 1120			psig	136	psig	psia			
Flow													
					 _	FLOW ST	REAM ATTR	BUTES		-	1		
Plate Coefficient (F _b) (F _p) Mofd		Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fact F _s	tor	Temperature F		viation Metered Flow actor R F _{p+} (Mcfd)		GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m
	[1	(OPEN FLO	OW) (DELI	VERABILITY) CALCUL	ATIONS		(P _s) ²	= 0.2	
(P _c) ² =		_:_	(P _w) ² =		P _d =		,% (F	e - 14.4) +	14.4 =	 :	(P _d) ²		
(P _e)²- (I or (P _e)²- (I	•	(F	P _c) ² - (P _w) ²	Choose formula 1 or 2: 1. P _o ² -P _e ² 2. P _o ² -P _o ² divided by: P _o ² -P _e ² by: Choose formula 1. or 2:		n x	LOG	Antilog Open Flow Deliverability Equals R x Antilog (Mcfd)					
Open Flo				Mcfd @ 14.	65 nsia		Deliverab	ility				2	
· ·		ionec	1 authority o			tates that I		-	o make th		t and that he ha		edge of
				aid report is true	and correc	t. Executed Rec	_	9	day of A				20 14
			Witness (il any)	19117		0 3 2014			For C	empany		<u> </u>
			For Comm	nission	(CONSERVAT	TION DIVISION	1		Check	red by	<u> </u>	

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 Foundation Energy Management, LLC
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 theRUEB FARM 13-15 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: 8/29/2014
Signature: <u>Hickell Nather</u>
Title: OPERATIONS ASSISTANT

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 accepting exempt status for the subject well. The form must be signed and dated on the front side as the ANNE WAY ONE OF A new less that I have been signed and dated on the front side as the ANNE WAY ONE OF A new less that I have been signed and dated on the front side as the ANNE WAY ONE OF A new less than the side of th