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

Type Test	t:				(	(See Instru	ctions on Re	verse Side	=				
= :	en Flo liverab				Test Date	e:			API	No. 15 023-	21282-00-0	0	
Company	<del></del>			<del></del>			Lease		<u> </u>	<u>- — — — — — — — — — — — — — — — — — — —</u>		Well No	
	ation	Ene		gement, LLC			NIPPS					13-	<del></del>
County CHEYE	NNE		Locati NE-N\	on N-NW-SW	Section	33	TWP 55	5	RNG (E	W) 9W		Acres /	Attributed
Field PRARII	E ST/	٩R			Reservoi NIOBR					thering Conne r Morgan	ction		•
Completion 4/21/20		e	-		Plug Bac	k Total Der	oth		Packer \$	Set at			
Casing S	ize	•	Weigh		Internal [		Set a		Perfo	orations	To		
7", 4 ½' Tubing Si			17 Weigh	<u>'# 11.6#</u> t	6.53	8, 4.000 Diameter	410 Set a	6, 1538 at	Perfo	1330' erations	136 To	<i>i</i> T'	
2 3/8"				4.7#		.995		1401					
Type Con SINGL	-	n (Di	escribe)			id Production WATER	on		Pump Ui	nit or Traveling		es / No OD PUN	MР
-	=	(Anı	nulus / Tubing	1)	% C	Carbon Diox	ride		% Nitrog	jen	Gas	Gravity -	G <sub>o</sub>
ANNUL		l)		···		Pre	ssure Taps				(Mete	er Run) (F	Prover) Size
				40.57									
Pressure	Pressure Buildup:		Shut in	10/7	0_14_at	9:30 AM	_ (AM) (PM)	Taken	20		at		(AM) (PM)
Well on L	ine:		Started	10/8	) 14 at _	9:30 AIVI	_ (AM) (PM)	Taken		20	at	<del></del>	(AM) (PM)
				-		OBSERV	ED SURFAC	E DATA			Duration of Sh	ut-in	24 Hours
Static / Dynamic	Orifi Siz		Circle ono: Meter	Pressure Differential	Flowing Temperature	Well Head Temperature	rature (P) or (P)		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>o</sub> ) psig psla		Duration	1 -	ild Produced
Property	(inch		Prover Pressu psig (Pm)	re in Inches H <sub>2</sub> 0	t	t					(Hours)	1	(Barrels)
Shut-In							37						
Flow													
				· · · · · · · · · · · · · · · · · · ·	<del></del>	FLOW ST	REAM ATTR	IBUTES				<u>.                                    </u>	<del></del>
Plate Coefficcient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd			Circle one: Meter or over Pressure psia	Press Extension P <sub>m</sub> xh	Grav Fac F <sub>s</sub>	tor	Flowing Temperature Factor F <sub>II</sub>	Deviation Factor F <sub>pv</sub>		Metered Flow R (Mcfd)	(Cubic	GOR (Cubic Feet/ Barrel)	
					_							-	
P <sub>c</sub> )2 =		:	(P <sub>w</sub> )² =	•	(OPEN FLO		VERABILITY	') CALCUL <sup>-</sup> c - 14,4) +			<b>(</b> F	P <sub>a</sub> ) <sup>2</sup> = 0.4 P <sub>a</sub> ) <sup>2</sup> =	207
	T			Choose formula 1 or 2:	1	<u> </u>		ssure Curve		Г	<u>`</u>		pen Flow
or	(P <sub>c</sub> ) <sup>2</sup> - (P <sub>a</sub> ) <sup>2</sup> or		°s)² - (P <sub>w</sub> )²	1, P <sub>c</sub> <sup>2</sup> -P <sub>c</sub> <sup>2</sup> 2, P <sub>c</sub> <sup>2</sup> -P <sub>c</sub> <sup>2</sup>	LOG of formula 1. or 2.		Slope = "n"		n x LOG		Antilog	De	liverability
(P <sub>c</sub> )²- (F	٠,٥٠			divided by: Pc2-P22	and divide by:	P <sub>c</sub> <sup>2</sup> P <sub>v</sub> <sup>2</sup>		signed lard Slope		LJ			(Mcfd)
			-				-		_				
Open Flo	w		I	Mcfd @ 14.0	55 psia		Deliverat	ility	<del></del>		Mcfd @ 14.65	psia	
		•	•	behalf of the			•	12	-	•	t and that he		14
e facts si	tated ti	nerei	n, and that sa	id report is true	and correc	t. Execute	i this the		day of		<del></del>	Re	20 eceived
<u>_</u> _			Witness (if	any)			-		_	For Co	KAN: ompany	SAS CORPO	ORATION COMMIS
			For Comm	ission			=		<del></del> :	Check	ked by	_NOA	1 4 2014
											(	CONSERV	ATION DIVISION

exempt status under Rule K.A.R. 82-3-304 on behalf of the operator	l dec	lare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
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	exempt s	tatus under Rule K.A.R. 82-3-304 on behalf of the operator Foundation Energy Management, LLC
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		
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		
I hereby request a one-year exemption from open flow testing for the NIPPS 13-33  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:		
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Signature:  Signature:  Signature:  OPERATIONS ASSISTANT		is not capable of producing at a daily rate in excess of 250 mcf/D
Signature:  Signature:  Signature:  OPERATIONS ASSISTANT		
Date:		
Signature:   Signature:   OPERATIONS ASSISTANT	staff as n	ecessary to corroborate this claim for exemption from testing.
Signature:   Signature:   OPERATIONS ASSISTANT		
ODERATIONS ASSISTANT	Date:	11/12/2014 
ODERATIONS ASSISTANT		
ODERATIONS ASSISTANT		
ODERATIONS ASSISTANT		
Title:		Signature Kirkel Prostation
		•
		ODEDATIONS 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 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.

\*\*Received\*\*
\*\*KANSAS CORPORATION COMMISSION\*\*