KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t:				(See Instruc	tions on Re	verse Side	?)				
= :	en Flo				Test Date					No. 15			
	liverat	onty			6/18/20	14			15-	075-30006 -			
Company Chesape		Ope	ating, L.L.C).			Lease St Colu	ımbans			1-12	Well Nu	mber
County Hamilto	on		Locati 2490 FS	ion SL & 2840 FEL	Section 12	-"-	TWP 22S		RNG (E.	/W)			Attributed
Field Bradsh	aw			-	Reservoi Winfiel					thering Conn Energy Ser	ection vices	VCC	WICH
Completic 12/26/6		te			Plug Bac 2760	k Total Dep	th		Packer S	Set at	•	י אָנטי ^	75 2011
Casing Si 5.5	ize		Weigh 14.0	nt	Internal D 5.012	Diameter	Set a 2772		Perfo 274	rations 6	то 2746	REC	EIVED
Tubing Si 2.375	ze		Weigh 4.7	nt	Internal D 1.995	Diameter	Set a 2759		Perfo	rations	То		
Type Con Single (n (D	escribe)		Type Flui Water	d Productio	n		Pump Ui Pump	nit or Traveling Unit	Plunger? Yes	/ No	
Producing		(An	nulus / Tubin	g)	% C	Carbon Diox	ide		% Nitrog	jen	Gas Gr .761	avity - (3,
Vertical D 2773		1)				Pres	ssure Taps						rover) Size
Pressure	Buildu	 ip:	Shut in 6/1	7 2	0_14_at_8	:00	(AM) (PM)	Taken 6/	18	20	14 at 8:00		(AM) (PM)
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	((AM) (PM)
						OBSERVE	D SURFACI	E DATA			Duration of Shut-	_{in_} 24	Hou
Static / Dynamic Property	Orif Siz (inch	85	Clicle one: Meter Prover Pressi psig (Pm)	Pressure Differentiat in Inches H ₂ 0	Flowing Temperature f	Well Head Temperature t	Cas Wellhead (P _{**}) or (P	Pressure	Wellhe	Tubing ead Pressure r (P _r) or (P _c)	Duration (Hours)		d Produced Barrels)
Shut-In			, , ,				48	62.4	36	50.4	24		
Flow			l L,					_		<u> </u>		<u></u>	
		_				FLOW STF	REAM ATTR	IBUTES			- i		1
Plate Coeffiect (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension √ P _m x h	Grav Fact F	tor	Flowing Temperature Factor F _{ti}	Fa	riation actor = pv	Metered Flov R (Mcfd)	v GOR (Cubic Fe Barrel)		Flowing Fluid Gravity G _m
								<u></u>					<u> </u>
(P _c)² =		:	(P_) ² =	:	(OPEN FLO		/ERABILITY) % (P) CALCUL ⁾ 。- 14.4) +		:	(P _a)	² = 0.2	07
(P _o) ² - (F or (P _c) ² - (F	P _a) ²	(F	P _o) ² - (P _w) ²	Choose formula 1 or 2 1. P _o ² -P _o ² 2. P _c ² -P _d ²	LOG of formula 1, or 2, and divide		Backpre: Slop	ssure Curve be = "n" or signed	, n x	LOG	Antilog	Op Deli Equals	pen Flow iverability i R x Antilog
				divided by: P _c ² -P _w	by:		Standa	ard Slope	_				(Mcfd)
Open Flov	w			Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 ps	ia	
The u	unders	igne	d authority, o	n behalf of the	Company, s	states that h	ne is duly au	thorized t	o make th	ne above repo	rt and that he ha	ıs know	ledge of
ne facts si	tated t	herei	n, and that sa	aid report is true	and correc	t. Executed	I this the		day of <u>N</u>	1ay			20 15
			Wilness (i	if any)			-			For (Company		
_			For Comm	nission			_			Char	ked by		
			10,000	- quality =						CHEC			

		under the laws of the state of Kansas th	
exempt status und	er Rule K.A.R. 82-3-30	04 on behalf of the operator_Chesapeak	ke Operating, L.L.C.
and that the foreg	oing pressure informa	ation and statements contained on this	s application form are true and
correct to the best	of my knowledge and	belief based upon available production	summaries and lease records
		oe of completion or upon use being mad	_
I hereby reque	est a one-year exempti	ion from open flow testing for the <u>St Co</u>	olumbans 1-12
gas well on the gr	ounds that said well:		KCC Man
	•		KCC WIC! JUN 05 201 RECEIVED
(Check	·		50N 05 201
	is a coalbed methane	•	RECEIVED
	is cycled on plunger l		
		I gas for injection into an oil reservoir ur	• -
	•	oresent time; KCC approval Docket No	
\checkmark	is not capable of prod	ducing at a daily rate in excess of 250 r	mcf/D
	e to supply to the best	of my ability any and all supporting do	cuments deemed by Commissior
I further agree		laim for exemption from testing.	
_	\prime to corroborate this cla		
_	to corroborate this cl		
staff as necessary	r to corroborate this cl		
_	r to corroborate this cl		
staff as necessary	r to corroborate this cl		
staff as necessary	r to corroborate this cl		·
staff as necessary	to corroborate this cl		
staff as necessary	to corroborate this cl	Signature: <u>Kevt</u> û W	right
staff as necessary	r to corroborate this cl		Mgw

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.