KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:				(See Instruct	tions on Re	verse Side)					
√ Op	en Flo	₩			Test Date	3'			ΔDI	No. 15		**		
De	liverab	ilty			3/28/20)25-21185 -	-000	0		
Company)per	ating, L.L.C				Lease Theis					4-17	Well Nu	mber
County Clark			Locati 660 FS	on L & 990 FEL	Section 17		TWP 35S		RNG (E/	N)		,	Acres /	Attributed
Field McKinn	iey				Reservoir	v/Chester	r	,		nering Conne dstream Ma		, LP		
Completic 7/31/99		ө			Plug Bac 6050	k Total Dept	th		Packer S	et at			K	C WIC
Casing Si	ize	_	Weigh	t	Internal E	Diameter	Set :		Perfor	ations		To 5975	JU	CC WIC
Tubing Si 2.375	zθ		Weigh	t	Internal E 1.995	Diameter	Set : 582		Perfor	ations		То	R	CEILL
Type Con Gas	npletion	1 (D	escribe)		Type Flui Water	d Production	n			it or Traveling ng Plungel		r? Yes	/ No	
Producing		(Anı	nulus / Tubin	j)	% C	arbon Dioxi	de		% Nitroge	en		Gas Gr	avity - (Э ₀
Vertical D		l)				Pres	sure Taps					(Meter I	Run) (P	rover) Size
Pressure	Buildu	p:	Shut in 3/2	7	14 at 8	:00	(AM) (PM)	Taken_3/	28	20	14 at	8:00		(AM) (PM)
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at.			(AM) (PM)
	_			T.	ı	OBSERVE	D SURFAC		1 =	-	Duration	n of Shut-	in 24	Hours
Static / Dynamic Property	Orifi Size (inche	В	Circle one: Meter Prover Presso psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature t	Well Head Temperature t	Cas Wellhead (P _w) or (F	Pressure	Wellhea	ubing ad Pressure (P ₁) or (P ₀) psia		ration ours)		d Produced Barrels)
Shut-In							112	126.4	106	120.4	24			
Flow														
						FLOW STR	EAM ATTR	IBUTES						 ,
Plate Coeffiect (F _b) (F Mcfd	ient ,)	Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F _{ri}	Fa	iation ctor pv	Metered Flow R (Mcfd)	v	GOR (Cubic Fe Barrel)	et/	Flowing Fluid Gravity G _m
(P _c) ² =			(P)2=	:	•	OW) (DELIV		") CALCUL "。- 14.4) +		•			2 = 0.2 2 =	.07
	P _a) ²		P _o) ² - (P _w) ²	Choose formula 1 or 2 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_w^2$	LOG of formula 1. or 2.	P.2. P.2	Backpre Slo 	essure Curve pe = "n" - or signed lard Slope	n x I	ГЪ	An	tilog	O _l Del Equals	pen Flow iverability s R x Antilog (Mcfd)
Open Flo	w_			Mcfd @ 14	.65 psia		Deliverat	oility			Mcfd @	14.65 psi	a	
		-		n behalf of the			•			•		nat he ha		-
			Witness (i	(any)		****	-			For C	Сотралу			
			For Comm	ission			-			Chec	cked by			

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 Chesapeake Operating, L.L.C. 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 Theis 4-17 gas well on the grounds that said well: (Check one) Is a coalbed methane producer Is a source of natural gas for injection into an oil reservoir undergoing ER Is a source of natural gas for injection into an oil reservoir undergoing ER Is not capable of producing at a daily rate in excess of 250 mct/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. Signature: Signature: Signature: Signature:	I declare und	ler penalty of periury (inder the laws of the	e state of Kansas that I am a	: uthorized 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					-
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Title: Katie Wright, Regulatory Analyst	staff as necessar	is on vacuum at the p is not capable of pro e to supply to the best	oresent time; KCC apducing at a daily rate of my ability any and aim for exemption f	pproval Docket No e in excess of 250 mcf/D ad all supporting documents d from testing.	

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.