KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Casing Size	Type Test	t:		-		.,	See Instr	uctions on Re	everse Side	;)					
Carpeatry County County Escation Section TWP RNG (EW) Acres Attributed Total Depth RICE C NE NE 13 188 9W Acres Attributed Rice R	Test														
Pressure Buldup: Started Start	Company					Lease						Vell Nu	mber		
SAINT	County Location									/W)	Acres Attributed				
Strict S	Field								thering Conn	ection		<u></u>			
10.5	Completic 3/1/05	on Dat	te			_	k Total De	epth	h		Set at				
2.375	Casing S	ize	•												
SINGLE GAS	Tubing Si 2.375	ize	•		t					Perforations		То			
Pressure Taps (Meter Run) (Prover) Size	Type Completion (Describe) SINGLE GAS										Plunger? Yes / No				
Pressure Buildup: Shut in MARCH 25 20 15 at 2:00 (AM) (PM) Taken MARCH 26 20 15 at 2:00 (AM) (PM)	Producing Thru (Annulus / Tubing) ANNULUS				% Carbon Dioxide				% Nitrog	jen	Gas Gravity - G _g				
Well on Line: Started	Vertical D 2535	epth(H	l)				Pr	essure Taps				(Meter F	lun) (Pi	rover) Size	
State of Orlice Dynamic Size Property (Inches) Pressure puls (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Inches H ₂ O Pressure Property (Inches) Paging (Pm) Paging Pagi	Pressure	Buildu	p:	Shut in MA	RCH 25 2	0 15 at 2	:00	(AM) (PM)	Taken_M	ARCH :	26 20	15 at 2:00	(AM) (PM)	
Static Orifice Orifice Meter Prover Pressure Pressure Differential Inches H ₂ 0 Pressure Differential Prover Pressure Prover Prover Prover Pressure Prover	Well on L	ine:	Started2			0 at		(AM) (PM)	(AM) (PM) Taken		20	at (AM) (AM) (PM)	
State Ortflice O							OBSER	VED SURFAC	E DATA			Duration of Shut-i	n_24.	0 Hours	
Shut-In	Dynamic	ynamic Size		Meter Prover Pressu	Differential in	Temperature Tempe		rature Wellhead Pressure (P _w) or (P ₁) or (P _c)		Wellhead Pressure (P _w) or (P _t) or (P _c)				•	
FLOW STREAM ATTRIBUTES Plate Coefficient (F ₂) (F ₂) Mcfd Press Extension Pressure Psia (OPEN FLOW) (DELIVERABILITY) CALCULATIONS (P ₂) ² = 0.207 (P ₂) ² = (P ₃) ²	Shut-In									μοισ	рзіа	24.0			
Plate Coefficient (Coefficient (F)	Flow						EI OW S	TOPAM ATTE	YBUTES						
Coefficient (F ₂)(F ₂) Prover Pressure plan Prover Pressure Pres	Plate			Circle one:		1	FEOW 5		1101123	_	··			Elawia a	
(P _c) ² = : (P _w) ² = : P _d = % (P _c -14.4) + 14.4 = : (P _d) ² = % (P _c) ² - (P _e) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _w) ² (P _c) ² - (P _c) ² (P _c) ² (P _c) ² - (P _c) ² (P _c) ² - (P _c) ² (P _c) ² - (P _c) ² (P _c) ² - (P _c) ² (P _c) ² - (P _c) ² (P _c) ² (P _c) ² (P _c) ² - (P _c) ²	Coeffiecient (F _b) (F _p)		Meter or Prover Pressure		Extension	Factor		Temperature F		actor R		(Cubic Feet/		Fluid Gravity	
(P _c) ² = : (P _w) ² = : P _d = % (P _c -14.4) + 14.4 = : (P _d) ² = % (P _c) ² - (P _e) ² = : (P _d) ² =															
Choose formula 1 or 2: 1. P _c ² - P _o ² 1. P _c ² - P _o ² 2. P _c ² - P _o ² divided by: P _c ² - P _w ² The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of he facts stated therein, and that said report is true and correct. Executed this the Received Witness (if any) Copen Flow Nord @ 14.65 psia Backpressure Curve Slope = "n" Assigned Standard Slope N x LOG Antilog Antilog Copen Flow N x LOG Antilog Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Mcfd @ 14.65 psia Deliverability Mcfd @ 14.65 psia March Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) MARCH Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) MARCH Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) MARCH Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) MARCH Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Deliverability Equals R x Antilog (Mcfd) Antilog Copen Flow Assigned Antilog Antilo						(OPEN FL	OW) (DEL	IVERABILITY) CALCUL	ATIONS				07	
Copen Flow Mcfd @ 14.65 psia Deliverability The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the	(P _o) ² =		_:_					_%(P _c - 14.4) +	14.4 =	;	(P _d) ²	=		
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the			(P _o) ² - (P _w) ²		1. P _a ² -P _a ² 2. P _c ² -P _d ²	LOG of formula 1, or 2. and divide		Slope = "n" or Assigned		n x LOG		Antilog	Deli Equals	Deliverability Equals R x Antilog	
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the															
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct. Executed this the	0 51	Non Flow Mark @ 14.65 asia				Dollingshiller			Mold @ 14 CE -pip						
he facts stated therein, and that said report is true and correct. Executed this the 26 day of MARCH , 20 15 . Received Witness (if any) KANSAS CORPORATION COMMISSION For Company DUSTIN DANIELS	Open Flot	w			MCTO W 14.	oo psia		Deliveral	omity			IVICIO W 14.65 psi			
Witness (if any) KANSAS CORPORATION COMMISSION For Company DUSTIN DANIELS			•	•		• •		-			•	rt and that he has		•	
DUSTIN DANIFI S				Witness (ii	anv)		L/Abid			HON .	For	Company			
FOLOGORIASSION ILLIN / U /III/ U CHACKAN AV		.					route				OUSTIN DAN	NELS			

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 MGMT, 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 the KOENIG 1-13 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.
Signature: <u>CASCJ</u> HALL Title: FOREMAN

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.