KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	t;				(-	See Instruct	tions on Rev	erse Side)				
□ Ор	en Flo	N			Test Date				ADI	No. 15			
☐ De	liverab	ilty			10/1/201					No. 15 191 -22, 496-	00-00		
Company AGV Co		_		-			Lease Chitwood	i	·		#1	Well Nu	mber
County Sumner			Location 1145'FNL & 2045'FWL		Section 34		TWP 31S		RNG (E/W) 3W		Acres Attributed		
Field Cora Sto	one				Reservoir White C				Gas Gat	hering Conne	ection	,	
Completic 12/18/20		е			Plug Baci 2197'	k Total Dept	h	-	Packer S none	Set at	<u> </u>		
Casing Size 4 1/2"			Weigh	it	Internal Diameter		Set at 2238'		Perforations 2064-2068		То		
Tubing Size 2-3/8			Weigh 4.7#	t	Internal Diameter		Set at 2145		Perforations 2130-2132		То		_ _
	pe Completion (Describe) Type Fluid Production Pump U				Plunger? Yes	s / No							
	g Thru	(An	nulus / Tubin	g)		arbon Dioxi	de		% Nitrog		Gas (aravity - (_
Annulus	_		<u> </u>			·							
Vertical D	epth(F	1)				Pres Flan	sure Taps				(Mete 2"	r Run) (P	rover) Size
Pressure	Buildu	p:	Shut in 9/3	02	15 at_		(AM) (PM)	Taken_10)/1				(AM) (PM)
Well on L	.ine;		Started	2	0 at		(AM) (PM)	Taken		20	at	:((AM) (PM)
	_				; -	OBSERVE	D SURFACE	DATA			Duration of Shu	ut-in_24	Hours
Static / Dynamic	Orifi Siz		Circle one: Meter Prover Presso	Pressure Differential	Flowing Temperature	Cosing Tubing		ad Pressure	Duration (Hours)	Duration Liquid Produce (Hours) (Barrels)			
Property	(inch	es)	psig (Pm)	Inches H ₂ 0	t	t	psig	psia_	(F _w) o	psia			
Shut-In				_		ļ	344.1			<u> </u>	24		
Flow			<u> </u>										
	 1					FLOW STR	REAM ATTRI	BUTES	_		_		
Plate Coeffiec (F _b) (F Mcfd	ient	Pro	Circle one: Meter or over Pressure psia	Meter or Extension Factor		*	Flowing Temperature Factor Factor F _{pv}		ctor	Metered Flow R (Mcfd)	y GOI (Cubic I Barre	Feet/	Flowing Fluid Gravity G _m
<u> </u>				<u> </u>				<u> </u>		<u>. </u>			
(P _c) ² =		_:	(P _w) ² =	·	(OPEN FLO		ERABILITY)	CALCUL - 14.4) +		:		$\binom{1}{3}^2 = 0.2$	207
(P _c) ² - (1	P ₆) ²	(1	P ₀) ² - (P _w) ²	Choose formula 1 or 2 1. P ₀ ² - P ₈ ²	LOG of formula			sure Curve	пх	LOG	Antilog	01	pen Flow liverability
(P _c) ² - (I	P _d) ²	_		2. P _o ² · P _d ² divided by: P _c ² · P _w	1. or 2 and divide by:	P.2-P.2		igned rd Slope					s R x Antilog (Mcfd)
					-	· ·	 	•	•			 	
Open Flo	l w		<u> </u>		.65 psia		Deliverabi				 Mcfd @ 14.65 p	 osia	
The	unders	igne	d authority, o	n behalf of the	Company, s	tates that h	ne is duly aut	horized t	o make ti	ne above repo	ort and that he	 has knov	vledge of
			· ·	aid report is true		_			day of _C	-			20 15
			Witness (if anv)	K	<u>(CC W</u>	/ICHIT <u>/</u>	4 .	X.	A Ken	and Company		
			For Comm			OCTO	2 2015 _						
			FOR CORE			REC	EIVED			Che	cked by		

	e under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt statu	is under Rule K.A.R. 82-3-304 on behalf of the operator <u>AGV Corp.</u>
and that the	foregoing pressure information and statements contained on this application form are true and
correct to the	e best of my knowledge and belief based upon available production summaries and lease records
•	t installation and/or upon type of completion or upon use being made of the gas well herein named.
í hereby	request a one-year exemption from open flow testing for the Chitwood #1
gas well on t	he grounds that said well:
.a	26 - 1,
(0	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 nece	essary to corroborate this claim for exemption from testing.
Date: 10/1/2	2015
Jaic	
	•
	Signature: Kent Robert
	Title: Lease Operations Manager

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.

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