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

Type Test	t:			•	(See Instruc	tions on Re	everse Side	∍)					
□ Ор	en Flow			Test Date	<b>.</b> ,			۸D	l No. 15				
✓ Deliverabilty				10-13-15					5-21932 <i>-0</i>	000			
Company Foundation Energy Management LLC 3 1			r m	:	Lease Hays					Well Number 2-9			
County Cocation Seward S2 N2 SW			Section 9		TWP			/W)	Acres Attributed				
Field Arkalon			Reservoi	r / Chester	345			thering Conn	Connection		CC V		
Completion Date			Plug Bac	k Total Dep	th	Packer Set a		•	——— <i>Өс</i> ү		7 2		
6-13-2004			- 6080	<u> </u>		None Porfor					·		
5.5	sing Size Weight " 5 17		nt p	Internal Diameter 4.892		Set at 6130		559	orations 8	To 5946		CEIL	
	ubing Size Weight		Internal Diameter 1.995		Set	Set at Pe		orations	То				
2.375 4.7 Type Completion (Describe) Single				Type Fluid Production Water				Pump Unit or Traveling Plunger? Yes / No Yes- Pump unit					
	Thru (Ar	nulus / Tubin	9)		arbon Diox	ide		% Nitro		Gas G	ravity - G	```	
Annulus													
Vertical D 6130	epth(H)				Pres	sure Taps				(Meter	Run) (Pr	over) Siz	
	Buildup:	Shut in Oc	tober 13th 2	0 15 at 7	:00 AM	(AM) (PM)	Taken O	ctober	14th 20	15 at 7:00 A	M (	AM) (PM	
Well on Li	ine:									at		AM) (PM	
					OBSERVE	D SURFAC	E DATA			Duration of Shut	-in	Hc	
Static / Dynamic Property	I Prover Pro			Flowing Temperature t	Well Head Temperature t	(P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Tubing Wellhead Pressure (P <sub>w</sub> ) or (P <sub>t</sub> ) or (P <sub>c</sub> )		Duration (Hours)		Liquid Produced (Barrels)	
Shut-In	-1, 1	E was	,			psig 40	psia 54	psig .5	psia 19	24	†		
Flow	٠.	;	,				i						
	. 1	HATTO THE	<i>i</i> 7.		FLOW STE	REAM ATTE	RIBUTES	·			•	-	
Plate Coeffieci (F <sub>b</sub> ) (F <sub>p</sub> Mcfd	ient p) Pi	Circle one: Meter or rover Pressure psia	Press Extension P <sub>m</sub> xh	Grav Fac F <sub>4</sub>	tor	Flowing Temperature Factor F <sub>ft</sub>	Fa	iation actor pv	Metered Flo R (Mcfd)	w GOR (Cubic Fo	et/	Flowin Fluid Gravit G <sub>m</sub>	
			<u> </u>										
(D. 13		/D. \2			OW) (DÈLIV						) <sup>2</sup> = 0.2	07	
(P <sub>c</sub> ) <sup>2</sup> =	Choose formula 1 or 2				6 (P <sub>c</sub> - 14.4) + 14  Backpressure Curve				(P <sub>d</sub> ) <sup>2</sup> =				
(P <sub>c</sub> ) <sup>2</sup> - (F or (P <sub>c</sub> ) <sup>2</sup> - (F	-	(P <sub>o</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup> 1. P <sub>o</sub> <sup>2</sup> - P <sub>o</sub> <sup>2</sup> 2. P <sub>o</sub> <sup>2</sup> - P <sub>o</sub> <sup>2</sup> divided by: P <sub>o</sub> <sup>2</sup> - P <sub>o</sub> <sup>2</sup>		LOG of formula 1, or 2, and divide by:		Slope = "n"or Assigned Standard Slope		l n x	LOG	Antilog	Deli Equals	Open Flow Deliverability Equals R x Antil (Mcfd)	
			- 0 W				<u>.                                    </u>						
Open Flow Mcfd @ 14.6			55 psia Deliverability			oility	Mcfd @ 14.65 psia						
·		od authority o		•	statos that h	·		n make t	ne ahove reno	ort and that he ha		edge of	
	•	•	aid report is true			•		day of _	•	ort and that he ha		20 <u>15</u>	
·-··					<del>_</del>								
		Witness (	it any)						For	Company			
		For Comm	nission			•			Che	cked by			

I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to reque exempt status under Rule K.A.R. 82-3-304 on behalf of the operator Foundation Energy Managed and that the foregoing pressure information and statements contained on this application form are true a correct to the best of my knowledge and belief based upon available production summaries and lease record 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 Hays #2-9 gas well on the grounds that said well:	hd ds
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 Commisstaff as necessary to corroborate this claim for exemption from testing.	ssion
Date: 10-21-15  OCT 23 2015  RECEIVED	
Signature: Latter O'M  Title: HSE/Argulatery Tech	-

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.