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

Type Test:				(	(See Inst	tructions on	Reverse Sid	e)				
Open Flow				Toot Date: API No. 15								
✓ Deliverabilty			Test Date: 10-5-15				API No. 15 175-20255 <b> 900 \$</b>					
Company Foundation Energy Management LLC :							Lease Black			Well Number 1-15		
County (** Seward	<del>                                     </del>	C SW		Section 15	<del></del>	TWP 34S			:/W)	,	Acres Attributed	
Field <b>Arkalo</b> n				Reservoii Morrow		er	Gas Gathering Conne Anadarko Pipeline		ection	•		
Completion 7-23-1975	Date	`, <u></u> ţ	- 13 4:33	Plug Bac	k Total E	Depth		Packèr Set at None				
Casing Size Weight 4.5 15.5			Internal E 4.052	Diameter		Set at 5979		orations i9	⊤o 5910			
Tubing Size 2.375	Tubing Size Weight			Internal E 1.995	Diameter.		Set at		orations	То		
Type Comple Single	etion (De	<del></del>	<u></u>	Type Flui Water	d Produc	ction		Pump U	nit or Traveling	g Plunger? Yes	/ No	
Producing Ti	hru (Ann	ulus / Tubin	g) .		arbon D	lioxide	<del></del>	% Nitrog	gen	Gas Gr	avity - G <sub>o</sub>	
Vertical Dept	th(H)			<del></del>	P	ressure Tap	s ·	•		(Meter F	Run) (Prover) Size	
5980	ilalua 4	Shut in Oct	tober 5th 2	. 15 8:	:00 AM	1 (444) /2	MAN JELES O	ctober (	 6th	15 <sub>at</sub> 8:00 A	M (AM) (PM)	
Pressure Bui	•									at		
			2		r	RVED SURF		#		Duration of Shut-	<u> </u>	
Dynamic	Orifice Size inches)	Circle one: Meter Prover Pressi psig (Pm)	Pressure Differential in Inches H <sub>2</sub> 0	Flowing Temperature t	Well He Temperat	ture (P <sub>w</sub> )	Casing ead Pressure or (P <sub>1</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		P-8 (/	1101100 1120		-	120	134	psig 100	114	24		
Flow	**	<u>.</u>										
					FLOW 9	STREAM AT	TRIBUTES					
Plate Coefficcient (F <sub>b</sub> ) (F <sub>p</sub> ) Mcfd	·   ·	Circle one: Meter or ver Pressure psia	Press Extension	Grav Fact F <sub>g</sub>	tor	Flowing Temperatu Factor	re F	viation actor F <sub>pv</sub>	Metered Flo R (Mcfd)	w GOR (Cubic Fe Barrel)	I (≧ratike I	
				,								
(P <sub>c</sub> ) <sup>2</sup> =	:	(P <sub>w</sub> )² =	: ;	(OPEN FLO		LIVERABIL %	(P <sub>c</sub> - 14.4)		. :	(P <sub>a</sub> )	<sup>2</sup> = 0.207 <sup>2</sup> =	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$	(P	。)²- (P <sub>w</sub> )²	Choose formula 1 or 2. 1. $P_c^2 - P_a^2$ 2. $P_c^2 - P_d^2$ divided by: $P_c^2 - P_a^2$	LOG of formula 1. or 2. and divide	P.2-P.	2	pressure Curve Slope = "n" or Assigned andard Slope	e n x	LOG	Antilog	Open Flow Deliverability Equals R x muliog (Mcfd)	
											a linewised as of	
						1					\$ 19 m	
Open Flow Mcfd @ 14.65 psia					Delive	Deliverability Mcfd @ 14.65 psia						
	•	• • •				•			•	ort and that he ha	s knowledge of	
ne tacts state	ed therei	n, and that sa	aid report is true	and correc	т. Ехеси	ned this the		day of:			, 20 <u></u> .	
		Witness (i	if any)			_	<u> </u>	<del></del> .	For	Company		
		For Comm	nission		<del></del>	. <b>-</b>			Che	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 Foundation Energy Managem 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 Black #1-15  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.  vis 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.	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 Manageme 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 Black #1-15  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 on vacuum at the present time; KCC approval Docket No.  I 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.		.*`
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	17-04-	staff as necessan	

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.