Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	:				(See Instruct	tions on Rev	erse Side)				
=	en Flov				Test Date	e:			API	No. 15			
De	liverabi	lty			8/19/20					-22234 - 0	000		
Company CMX, Inc							Lease Kincaid				1-6	Vell Nui	mber
County Barber			Locati C NW I		Section 6		TWP 34S		RNG (E/ 13W	W)		cres A	ttributed
Field Aetna G	as Fie	ld			Reservoia Mississi				Gas Gat OneOK	hering Conn	ection		
Completic 5/8/89	on Date	•			Plug Bac 4871	k Total Dept	th		Packer S	Set at			.
Casing Si 4.5	ize		Weigh 10.5	t	Internal D 3.927	Diameter	Set at 4898		Perfo 478	rations	To 4824		<u> </u>
Tubing Size 2.375			Weigh 4.7	t	Internal Diameter 1.995		Set at 485 0		Perforations		То		
Type Con Single	npletion	(De	escribe)		Type Flui oil/wat	d Production	n		Pump Ur Pumpi		Plunger? Yes	/ No	
	g Thru	(Anr	nulus / Tubing	<u>a)</u>		arbon Dioxi	de		% Nitrog		Gas Gra	vity - G	 i _a
Annulus	3												
Vertical D	epth(H)		·		Pres	sure Taps				(Meter P	un) (Pr	over) Size
Pressure	Buildur	o: 8	8/1 Shut in	8 2	0_15_at_7	:00 AM	(AM) (PM)	Taken_8/	19	20	15 at 7:00 A	VI (,	AM) (PM)
Well on L			Started 8/1	20	0 15 at 7	:00AM	(AM) (PM)	Taken_8/2	20	20	15 at 7:00 Al	√I (,	AM) (PM)
					,	OBSERVE	D SURFACE	DATA			Duration of Shut-i	24	Hours
Static / Dynamic Property	Orific Size (inche	,	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H _o 0	Flowing Temperature t	Well Head Temperature t	(P _w) or (P _t	ressure) or (P _c)	Wellhe (P _w) or	ubing ad Pressure (P _L) or (P _c)	Duration (Hours)		i Produced Barrels)
Shut-In			paig (i iii)	miches 11 ₂ 0	······································		psig 182	psia	psig	psia	24		
Flow													
	- 1			Γ		FLOW STR	EAM ATTRI	BUTES					
Plate Coeffiec (F _b) (F Mofd	ient ,)		Circle one; Meter or ver Pressure psia	Press Extension ✓ P _m x h	Grav Fac F	tor 1	Flowing Femperature Factor F _{ft}	Fa	ation ctor pv	Metered Flow R (Mcfd)	v GOR (Cubic Fee Barrel)	·t/	Flowing Fluid Gravity G _m
									·				
			-		(OPEN FL	OW) (DELIV	ERABILITY)	CALCUL	ATIONS		(P) ²	= 0.20	 07
(P _d)² ==		_:	(P _w) ² =		P _d =		%· (P,	_: - 14.4) +	14.4 =	:	(P _d) ²		
(P _e) ² - (I		(P	(_c) 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. and divide	P. 2 - P. 2	Slope Assi	sure Curve e = "n" or igned rd Slope	n x l	LOG	Antilog	Deli Equals	en Flow verability R x Antilog Mcfd)
Open Flor	w			Mcfd @ 14.	65 psia		Deliverabil	lity			Mcfd @ 14.65 psia	1	
		-	•		· -		•		o make th	•	rt and that he has		•
tne facts s	tated th	ierei	n, and that sa	aid report is true	and correc				day of			, , 2	15
			Witness (I	f any)		<u>KC</u> C	MICH			For C	Company		
			For Comm	ission		NOV	04 201	<u> </u>		Char	cked by		
			i di Colfill							Chet	mou by		

nalty of perjury under the laws of the state of Kansas that I am authorized to request ale K.A.R. 82-3-304 on behalf of the operator CMX, Inc. pressure information and statements contained on this application form are true and y knowledge and belief based upon available production summaries and lease records an and/or upon type of completion or upon use being made of the gas well herein named.
one-year exemption from open flow testing for the Kincaid #1-6
s that said well:
coalbed methane producer /cled on plunger lift due to water source of natural gas for injection into an oil reservoir undergoing ER n vacuum at the present time; KCC approval Docket No ot capable of producing at a daily rate in excess of 250 mcf/D
upply to the best of my ability any and all supporting documents deemed by Commissio
orroborate this claim for exemption from testing.
Signature. Title: President
r

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.

