## Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	t:		-	(	See Instruc	tions on Re	verse Side	<del>;</del> )					
<b>√</b> Op	en Flow			<b>~</b>				4.00	N 48				
De	liverabilty	1		Test Date 8/20/20					No. 15 077-00850 <b>-</b>	0000			
Company		erating, L.L.	C.`			Lease Conrard	ly B			3-1	Well Nu	mber	
County Location Harper 3630 FSL & 990 FEL			Section 1		TWP RNG (E 31S 9W		W) Ac		Acres A	attributed			
Field Spivey-Grabs-Basil				Reservoir Mississippian			Gas Gathering Connection OneOk Energy Services						
				Plug Back Total Depth 4525			Packer S	et at					
Casing Size Weight				Internal I 5.012	Diameter		Set at Perfo 4544 447				то 4481		
Tubing Size Weight 2.875 6.5			Internal I	Diameter	Set a	ıt	Perforations		То				
				Type Fluid Production Oil/Water			Pump Unit or Traveling Plunger? Yes / No Pump Unit						
_		Annulus / Tubi	ng)		arbon Dioxi	ide		% Nitrog		Gas Gr	avity - 0		
Annulus													
Vertical D 4544	epth(H)	•	٠		Pres	sure Taps				(Meter I	Run) (Pi	rover) Size	
Pressure	Buildup:	Shut in 8/	19 2	o_15_at_8	:00 ·	(AM) (PM)	Taken_8/	20	20	15 <sub>at</sub> 8:00	(	AM) (PM)	
Well on L	ine:	Started	2	0 at		(AM) (PM)	Taken		20	at	(	AM) (PM)	
					OBSERVE	D SURFACI	E DATA	1		Duration of Shut-	<sub>in</sub> 24	Hours	
Static / Dynamic Property	Orifice Size (inches	Prover Pres	Differential Temperature Temperature (P <sub>w</sub> ) of the sure		(P <sub>w</sub> ) or (P	Pressure Wellhead Pressure		ad Pressure (P <sub>t</sub> ) or (P <sub>c</sub> )	Duration L (Hours)		d Produced Barrels)		
Shut-In				h.		40	54.4	85	99.4	24	:	•	
Flow			ı	,						<u> </u>			
			_		FLOW STF	EAM ATTR	BUTES						
Plate Coeffiecient (F <sub>p</sub> ) (F <sub>p</sub> ) Mcfd		Circle one: Meter or Prover Pressure psia	Press Extension P <sub>m</sub> xh	Gravity Factor F <sub>g</sub>		Flowing Temperature Factor Ftt		iation ctor <sub>pv</sub>	Metered Flow R (Mcfd)	GOR (Cubic Feet/ Barrel)		Flowing Fluid Gravity G <sub>m</sub>	
										, i			
(P <sub>c</sub> ) <sup>2</sup> =	:	: (P <sub>w</sub> )²	= :	(OPEN FL	, ,	ERABILITY	) CALCUL <sup>)</sup> c - 14.4) +		:	(P <sub>a</sub> )	<sup>2</sup> = 0.2	07	
(P <sub>c</sub> ) <sup>2</sup> - (F		(P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup>	Choose formula 1 or 2  1. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup> divided by: P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup>	LOG of formula 1, or 2, and divide	P <sub>c</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup>	Backpre Slop As	ssure Curve be = "n" or signed ard Slope	n x I	.og [ ]	Antilog	Op Deli Equals	en Flow verability R x Antilog Mcfd)	
,													
Open Flor	<u> </u>		Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 psi	l ia		
***		ned authority.		•	states that h	:	-	o make th		rt and that he ha		ledge of	
	-	•	said report is true			•			•			15	
-						CHITA		-					
		Witness	(if any)	(	OCT 26	2015			For	Company -			
		For Con	mission		RECE	_			Chec	cked by			

ಿ ನಿಗ್ಗಳಿ- Lideclare under penalty of per	rjury under the laws of the state of Kansas that I am authorized to request								
	2-3-304 on behalf of the operator Chesapeake Operating, L.L.C.								
	nformation and statements contained on this application form are true and								
correct to the best of my knowledg	e and belief based upon available production summaries and lease records								
of equipment installation and/or up	on type of completion or upon use being made of the gas well herein named.								
I hereby request a one-year ex	kemption from open flow testing for the Conrardy B 3-1								
gas well on the grounds that said t	well:								
(Charle and)									
(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	e best of my ability any and all supporting documents deemed by Commission
staff as necessary to corroborate	this claim for exemption from testing.								
* *									
Date: 10/21/2015									
•	<b>→</b>								
	Signature: San a Europe TA								

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.