Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	t:				(See Instruci	tions on Rev	verse Side	;)				
✓ Open Flow				¥ 5.4	Y B.A			451	No de				
Deliverabilty					Test Date 9/15/20			API No. 15 15-033-21431 ~ 6000					
Company		Оре	rating, L.L.C	·			Lease Diane					Well Nu 1-9	mber
County Comanche			Location 1470 FSL & 1320 FEL		Section 09		TWP 35S		RNG (E/W) 16W		Acres Attributed 640		Attributed
Field Yellows	tone				Reservoir Mississ				Gas Gat Atlas	hering Conn	ection		
Completion Date 07/07/2005					Plug Bac 5,551	Plug Back Total Dept 5,551		h Pa N		Set at			
Casing Size 4.5			Weight 11.6		Internal I	Internal Diameter 4.00		Set at 5582		rations 2	то 5371		
Tubing Size 2.375			Weigh	t	Internal I	Diameter	r Set at 5516		Perforations		То		
Type Con Single (n (D				d Production Vater			Pump Ur Pump		Plunger? Yes	/ No	
<u>-</u>		(An	nulus / Tubing	9)		arbon Dioxi	de		% Nitrog		Gas Gr	avity - 0	3,
Annulus			ng										
Vertical D	epth(F	1)			•	Press Flan	sure Taps ge				. (Meter I	Run) (Pi	rover) Size
Pressure	Buildu	p:	Shut in 9/1	42	0_15 at_8	:00	(AM) (PM)	Taken_9/	15	20	15 at 8:00	((AM) (PM)
Well on L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	((AM) (PM)
						OBSERVE	D SURFACE	DATA			Duration of Shut-	_{in 24}	Hours
Static / Dynamic Property	Orifi Siz (inch	e	Circle one: Meter Prover Pressu psig (Pm)	Pressure Differential in Inches H ₂ 0	Flowing Temperature	Well Head Temperature t	(P _w) or (P	Pressure	Wellhe (P _w) o	Tubing head Pressure or (P ₁) or (P _c) Duration Liquid Produced (Barrels)			
Shut-In	•		poig (r m)	illonos 11 ₂ 0	;		gsig 380	394.4	265	279.4	24		
Flow													
						FLOW STR	EAM ATTRI	BUTES					
Plate Coefficcient (F _b) (F _p) Mcfd		Pro	Circle one: Meter or over Pressure psia	Press Extension P _m x h	Extension Fac		I Tomooraturo		iation ctor : pv	Metered Flov R (Mcfd)	GOR (Cubic Feet/ Barrel)		Flowing Fluid Gravity G _m
						.,							
							ERABILITY)					² = 0.2	07
$(P_c)^2 = $		<u>-:</u>	(P _w)²=	Choose formula 1 or 2	P _d =	 °	1 .	- 14.4) +	1	: :	(P _d)	<u>'=—</u>	
(P _c) ² - (F or (P _c) ² - (F	P _a) ²	(F		Choose formula 1 or 2 1. P _c ² - P _e ² 2. P _c ² - P _d ²	and divide	P _c ² -P _w ²	Slop	ssure Curve le = "n" or signed	l a x i	LOG	Antilog	Deli Equals	en Flow iverability R x Antilog
	u.			divided by: $P_c^2 - P_w$	by:	<u></u>	Standa	ard Slope				((Mcfd)
I													
Open Flo	w			Mcfd @ 14.	65 psia		Deliverab	ility			Mcfd @ 14.65 psi	a	
The u	unders	igne	d authority, o	n behalf of the	Company, s	states that h	e is duly au				rt and that he ha	s know	ledge of
the facts s	tated t	herei	in, and that sa	aid report is true	e and correc	t. Executed	this the 21	<u>A</u>	day of O	ctober		,;	₂₀ <u>15</u> .
		_	Witness (i	fany)			6 2015			For C	Company		
			For Comm	Ission			CEIVED			Chec	cked by	•	

	``` ე(ኔ
l decl	are under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exempt st	atus under Rule K.A.R. 82-3-304 on behalf of the operator <u>Chesapeake Operating, L.L.C.</u>
and that t	he 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
	ent installation and/or upon type of completion or upon use being made of the gas well herein named.  by request a one-year exemption from open flow testing for the Diane 1-9
	in 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
	is not capable of producing at a daily rate in excess of 250 mcf/D
I furth	er agree to supply to the best of my ability any and all supporting documents deemed by Commission
	ecessary to corroborate this claim for exemption from testing.
Date: 10/	21/2015
	Signature: Sara Encett
	Title: Sara Everett Regulatory Analyst

## 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.