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

Type Test	: en Flow	: :	<u>;</u> -:		See Instruct	ions on Re	verse Side	): .	•			
. =	liverabilty	į	:	Test Date 9/15/20			"į. i		No. 15 207-22957 -	6000	1	
Company	ake Ope	rating, L.L.C.	·			Lease Barbara	<u> </u>	; '		1-30	Well Number	-
County Barber		Location 1320 FSL 8		Section 30		TWP 34S		'RNG (E/ 15W	<b>W</b> ): : :	·	Acres Attributed	
Field Reservoir Gas Gathering Connection SOUTH AETNA MISSISSIPPI OneOK Field Services										_		
Completic 2/6/2006			· · · · · · · · · · · · · · · · · · ·	Plug Bac 5082	Plug Back Total Depth Packer Set at 5082 NONE					. •		
Casing S 5.5	ize	Weight 15.5		Internal E 4.950	Diameter	Set a 512		Perfor 4928	ations .	то 5018		
Tubing Si 2.375	ze	Weight 4.7		Internat E 1.995	Diameter	Set a 505		Perfor	ations	То	, , , ,	_
Type Completion (Describe)  Type Fluid Production  Pump Unit or Traveling Plunger? Yes / No  Single Gas  Water  Pump Unit												
Producing Thru (Annulus / Tubing) % Carbon Dioxide % Nitrogen Gas Gravity - G <sub>g</sub>												
Annulus											_	
Vertical Depth(H) Pressure Taps (Meter Run) (Prover) Size 6300										Э		
	Buildup:	Shut in 9/14	20	15 at 8	.00	(AM) (PM)	Taken 9/	15	20	15 at 8:00	(AM) (PM)	_
Well on L	ine:	Started	20	at		(AM) (PM)	Taken	, ,	: 20	at	(AM) (PM)	
OBSERVED SURFACE DATA Duration of Shut-in 24 Hours												
		Circle one:	Pressure	•	OBSERVE	· ·	E DAȚA	· F · : т	ubing	Duration of Shut	t-in_ <del></del> Hou 	ırs
Static / Dynamic Property	Orifice Size (inches)	Meter Prover Pressure psig (Pm)	Differential	Flowing Temperature t	Well Head Temperature t	Wellhead (P <sub>w.</sub> ) or (F	Pressure .	Wellhea (P <sub>w</sub> ) or	id Pressure (P,) or (P <sub>c</sub> )	Duration (Hours)	Liquid Produced (Barrels)	
Shut-In	· ·	1,500		• .	,	350	364.4	10	24.4	24		
Flow			,	. *								
FLOW STREAM ATTRIBUTES												
Plate Coeffied (F <sub>b</sub> ) (F Mofd	ient ") Pr	Circle one: Meter or over Pressure psia	Press. Extension	Grav Faci	tor T	Flowing emperature Factor F <sub>ft</sub>	'   Fa	iation ctor	, Metered Flo R (Mcfd)	w GOR (Cubic F	eet/ Fluid	-
	;	<u>·i</u>	•					1. 1	· ' '	,		
.; .				(OPEN FL	OW) (DELEV	ERABILITY	) CALCUL	ÁTIONS	4	(P,	)2 = 0.207	
$(P_c)^2 = _{_{_{_{_{_{_{_{_{_{_{_{_{_{_{_{_{_{_$	<u> </u>	(P <sub>w</sub> )² =	: ·	P <sub>d</sub> =		6 (F	c - 14.4) +	14.4 =	; ·		)2 =	
(P <sub>c</sub> ) <sup>2</sup> - (I or (P <sub>c</sub> ) <sup>2</sup> - (I	⊃ <sub>a</sub> )² (	P <sub>c</sub> ) <sup>2</sup> - (P <sub>w</sub> ) <sup>2</sup> ·	1. P <sub>c</sub> <sup>2</sup> - P <sub>e</sub> <sup>2</sup> 2. P <sub>c</sub> <sup>2</sup> - P <sub>d</sub> <sup>2</sup>	LOG of formula 1. or 2. and divide	P <sub>2</sub> P <sub>w</sub> 2	Slo	ssure Curve pe = "n" - or signed lard Slope	nxl	.og	: Antilog :	Open Flow Deliverability Equals R x Antilo (Mcfd)	ğ
1 2		aivi	ded by: P <sub>c</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup>	by:	<u> </u>	Johand		173	111			_
,		;					;	•		, , ,		
Open Flo	w		Mcfd @ 14.6	55 psia	<del></del>	Deliverab	oility			Mcfd @ 14.65 ps	sia .	
The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of									_			
the facts stated therein, and that said report is true and correct. Executed this the 19 day of October , 20 15 . KCC WICH!TA												
<del>- ;,</del>		Witness (if ar	ly)	*	OCT 2		<u> </u>	:,	: For	Company		
<u> </u>		For Commissi	<u></u>	<u>.</u>		6 2015 EIVED	<u></u>	3:1		cked by	· · · · · · · · · · · · · · · · · · ·	_

I declare under penalty of perjury under the laws	s of the state of Kañsas that I am authorized to request
exempt status under Rule K.A.R. 82-3-304 on behalf of	the operator_Chesapeake Operating L.L.C.
	ements contained on this application form are true and
correct to the best of my knowledge and belief bas∋d i	upon available production summaries and lease records
of equipment installation and/or upon type of comp etic	on or upon use being made of the gas well herein named.
I hereby request a one-year exemption from open	•
gas well on the grounds that said well:	
(Check one)	
is a coalbed methane producer	
is cycled on plunger lift due to water	er, i i i i i i i i i i i i i i i i i i i
is a source of natural gas for inject	ion into an oil reservoir undergoing ER
is on vacuum at the present tim∋; k	CC approval Docket No
is not capable of producing at ∈ da	aily rate in excess of 250 mcf/D
I further agree to supply to the best of my ability a	any and all supporting documents deemed by Commission
staff as necessary to corroborate this claim for exemp	ption from testing.
Date: 10/19/2015	
Date: 10/10/2010	
and the second of the second o	
Signature:	Same Similar
KCC MIPULL	
OCT 2 6 2015	Sara Everett, Regulatory Analyst
RECEIVED	전 그리 물병 그렇는 그 기
RECEIVED	
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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.