Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

Type Test	:			*	(See Instruc	tions on Rev	erse Side)				
√ Op	en Flov	٧			Test Date				A DI	No. 15			
Del	liverabi	lty			9/15/20					00. 15 007-22606 -	- 0000		
Company)per	ating, L.L.C).			Lease Woolsey	/			1-8	Well Num	ber
County Barber			Location 450' FSL - 2185'		Section 8		TWP 35S		RNG (E/W) 15W			Acres Attributed	
Field Aetna Ga	oo Aro				Reservoir	•			Gas Gat	nering Conni	ection		
Completic				. (*)155	i ssipi Plug Bac	k Total Dept	th		Packer S	et at			
1/21/2004 Casing Size			Welgh		5190 Internal Diameter		Set at		NONE Perforations		т-		<u></u>
4.5			11.6	11	4.0		5224		5090		то 5180)	
Tubing Size 2.375			Weigh 4.7	nt	Internal Diam 1.995		eter Set at 5083		Perforations		То		
Type Con Single-C		(De	escribe)	Water/Oil Pump Unit		s / No	·						
		(Anr	nulus / Tubin	g)	% C	arbon Dioxi	ide	-	% Nitrog	ən	Gas C	Gravity - G	
Annulus Vertical D) .	-			Pres	sure Taps				(Mete	r Run) (Pro	ver) Size
5135						Flan	ge			•	.623		
Pressure	Buildup	o: '	Shut in <u>9/1</u>	<u>4 </u>	o_15_at_8	:00	(AM) (PM)	Taken_9/	15	20	15 at 8:00	(A	M) (PM)
Well ón L	ine:		Started	2	0 at		(AM) (PM)	Taken		20	at	(A	M) (PM)
					-	OBSERVE	D SURFACI	E DATA			Duration of Shu	_{ut-in} 24	Hours
Static / Dynamic Property	Orific Size (inche	Э	Circle one: Meter Prover Press		Flowing Temperature t	Well Head Temperature t	Cas Wellhead (P _w) or (P	Pressure	Wellhe	ubing ad Pressure (P ₁) or (P _c)	Duration (Hours)		Produced arrels)
Shut-In		<u>. '</u>	psig (Pm)	Inches H ₂ 0			psig 75	psia 89.4	psig 400	psia 414.4	24		
Flow													
!						FLOW STF	REAM ATTR	IBUTES			-	-1	
Coeffied (F _b) (F	Plate Coefficient (F _b) (F _p) Mofd		Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fac	tor	Flowing Temperature Factor F _{ft}		riation actor = pv	Metered Flov R (Mcfd)	W GOR (Cubic I Barre	Feet/	Flowing Fluid Gravity G _m
				J	(OPEN FL	OW) /DELIV	ERABILITY	CALCIII	ATIONS				
(P _c) ² =		_:	(P _w) ² =	·:	P _d =			, P _c - 14.4) +		:		$\binom{1}{6}^2 = 0.20$,
$(P_o)^2 - (P_a)^2$ or $(P_o)^2 - (P_d)^2$		(F	° _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: $P_c^2 - P_w^2$	P ² -P ² LOG of formula P ² -P ² and divide		Backpres Slop 		l n x i	og [Antilog	Delive Equals I	n Flow erability R x Antilog Icfd)
	_								_				
Onen Ele				Motel @ 14	65 pain	- 	Deliverab	.:!!+			Mcfd @ 14.65 p	nsia.	·]
Open Flo	-	iane	d authority o	Mcfd @ 14.	<u> </u>	etates that h		•	i.		ort and that he		dge of
		•	· ·	aid report is true			-			ovember	Nr diffe night life		15 .
				•		KANSAS	Receive CORPORATION	d					
			Witness	(if any)			EC 02	2015		Fore	Company		
			For Com	mission		CON	SERVATION D WICHITA, K			Che	cked by		

	that we will be a second of the second of th
	lare under penalty of perjury under the laws of the state of Kansas that I am authorized to request
exemp	tatus under Rule K.A.R. 82-3-304 on behalf of the operator Chesapeake Operating, L.L.C.
and the	the foregoing pressure information and statements contained on this application form are true and
correct	the best of my knowledge and belief based upon available production summaries and lease records
-	nent installation and/or upon type of completion or upon use being made of the gas well herein named.
۱h	eby request a one-year exemption from open flow testing for the Woolsey 1-8
gas we	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
	is not capable of producing at a daily rate in excess of 250 mcf/D
l fı	her agree to supply to the best of my ability any and all supporting documents deemed by Commission
	necessary to corroborate this claim for exemption from testing.
otan at	obobbary to correspond this claim for exemption from testing.
Date:_	/16/2015
	Signature: Sara Everett

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.