KANSAS CORPORATION COMMISSION ONE POINT STABILIZED OPEN FLOW OR DELIVERABILITY TEST

Type Test	:				(See Instruc	ctions on Rev	erse Side)						
√ Op	en Flo	N			Test Date				ADI	No. 15					
Del	liverab	ilty			6/24/201					129-10134 -	-000	ספ			
Company Chesapeake Operating, L.L.C.					Lease Swanson				1-20				Well Number		
County Location Morton 1980 FSL & 1980 FEL				Section 26		TWP 31S			W)	Acres Attributed					
Field Kinsler	East				Reserveir Morrow					hering Conne idstream Ma		g LP	-		
Completic 4/7/61	on Dat	е	-		Plug Back 5688	k Total Dep	oth		Packer S	Set at					
			Weight 9.5		Internal C 4.090	Internal Diameter 4.090		Set at 5845		Perforations 5428			т _о 5659		
Tubing Si 2.375	Tubing Size Weight 2.375 4.7				Internal D 1.995	Diameter		Set at 5665		Perforations					
Type Con Single (1 (De	escribe)		Type Flui Water	d Production	on	_		nit or Traveling	Plung	er? Yes	/ No		
Producing Thru (Annulus / Tubing) Annulus				% C	% Carbon Dioxide				% Nitrogen Gas				Gravity - Gg		
Vertical D		l)				Pre	ssure Taps					(Meter l	Run) (Pa	over) Size	
6050	D. Alder		oh 6/23		. 15 B:	:00	/AM/ /DM/	6/	24	20	15	. 8:00		AM) (PM)	
Pressure Well on L		•	Shut in	2											
				· ·		OBSERV	ED SURFACE	DATA			Durati	on of Shut-	in_24	Hours	
Static / Dynamic	Dynamic Size		Circle one: Meter Prover Pressui	Pressure Differential		Well Head Temperature	Cas Wellhead	Casing Wellhead Pressure (P_w) or (P_t) or (P_c)		Fubing ad Pressure r (P _t) or (P _c)		Duration (Hours)	Liquid Produced (Barrels)		
Property Shut-In	(inch	es) ——	psig (Pm)	Inches H ₂ 0	t 	t	psig 180	psia 194.4	psig 40	psia 54.4	24				
Flow						_	100	104.1	1	04.4	27	<u> </u>	<u> </u>		
			. <u>-</u>			FLOW ST	REAM ATTR	BUTES					.		
Plate Coefficcient (F _b) (F _p) Mcfd		Pro	Circle one: Meter or over Pressure psia	Press Extension ✓ P _m x h	Grav Fact F _c	tor	Flowing Temperature Factor F _{ft}	Temperature Factor F		ctor R		w GOR (Cubic Fee Barrel)		Flowing Fluid Gravity G _m	
(P _c) ² =		_:	(P _w)² =	;	•	OW) (DELI	VERABILITY _% (F		.AΠONS - 14.4 =	:		(P _a)	²= 0.2 ²=	07	
$(P_c)^2 - (P_a)^2$ or $(P_c)^2 - (P_d)^2$		(P _e) ² - (P _w) ²		noose formula 1 or 2: 1. P _c ² - P _a 2. P _c ² - P _d 2. P _c ² - P _d wided by: P _c ² - P _w LOG of formula 1. or 2 and divide by:			Slop As:	Backpressure Curve Slope = "n" or		n v 106		Antēog		Open Flow Deliverability Equals R x Antilog (Mofd)	
								_			_				
Open Flow Mcfd @ 14.6					65 psia	5 psia Deliverability			Mcfd @ 14.65 psia						
The	unders	igne	d authority, or	behalf of the	Company, s	states that	he is duly au			•	ort and	that he ha	is know	ledge of	
the facts s	stated 1	here	in, and that sa	id report is tru	and correct	t. Execute Rece SAS CORPORA	ed this the 16 eived ATION COMMISS		day of N	lovember		,	,	20 _15	
			Witness (il	any)		DEC 0 2 2015				ForCompany					
			For Commi	ssion	•		LIÖN DIAIRIUM			Che	ckeđ by				

	clare under penalty of perjury under the laws of the state of Kansas that I am authorized to request status under Rule K.A.R. 82-3-304 on behalf of the operator Chesapeake Operating, L.L.C.
and tha correct of equip I he	the foregoing pressure information and statements contained on this application form are true and to the best of my knowledge and belief based upon available production summaries and lease records ment installation and/or upon type of completion or upon use being made of the gas well herein named. The reby request a one-year exemption from open flow testing for the Swanson 1-26 on the grounds that said well:
- I fui	(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 ther 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.
	Signature: 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.