Kansas Corporation Commission One Point Stabilized Open Flow or Deliverability Test

| Type Test: (See Instructions on Reverse Side) | | | | | | | | | | | | | |
|---|--------------------|---|-----------------------------------|-----------------------|--------------------------|---------------------|----------------------------|--|------------------|-------------------|-----------------------------------|---------------------------------|--|
| Open Flow | | | | | | | | | 101 | 20 <i>574</i> | 0.00 | | |
| Deliverabilty | | | Test Date | Test Date: | | | | No. 15 181- | ZED#C5U | 0-00 | | | |
| Company Lease Well Number | | | | | | | | | | | | | |
| | | nergy Mana | agement, LL0 | 3 | Е | BUCHOLT | Z | | | | | 1-06 | |
| County | <u> </u> | Loca | | Section | | | | RNG (E/W) | | | Acres Attributed | | |
| SHERMAN NW-SE-NW-SW | | | | | 6 6S | | | 39W | | | | | |
| Field | | | | Reservoir | Reservoir | | | | hering Conn | ection | | | |
| GOODLAND NIOBRARA | | | | NIOBRA | ARA | | | PRAIRIE STAR | | | | | |
| Completion Date | | | | | Plug Back Total Depth | | | Packer S | Set at | | | | |
| 4/29/2011 Casing Size Weight | | | | 1492 | Internal Diameter Set at | | | D1- | | , <u></u> | •- | | |
| 7", 4 ½" 17# 11.6.5# | | | | | 376, 1533 | | Perforations 1317 | | | то 1350 | | | |
| | Tubing Size Weight | | 6.538, 4.000 Internal Diameter | | Set at | | Perforations | | | To | | | |
| 2 3/8" 4.7# | | | | 995 | 1373 | | | | , | • | | | |
| Type Con | npletion (| Describe) | | | Type Fluid Production | | | | nit or Traveling | Plunger? | Yes / N | 0 | |
| SINGLE | | | | SALT | SALTWÄTER | | | | ROD I | | | JMP | |
| Producing Thru (Annulus / Tubing) % Carbon Dioxide % Nitrogen Gas Gravity - 0 | | | | | | | | | | - G _g | | | |
| ANNULUS | | | | | | | | | | | | | |
| Vertical Depth(H) Pressure Taps (Meter Run) (Prover) Size | | | | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | |
| Pressure | Buildup: | Shut in | 12/8 | 20_15_at1 | 1:00 PM | (AM) (PM) T | īaken | | 20 | at | | (AM) (PM) | |
| Woll on I | ino | Started | 12/9 | , 15 _a , 1 | I:00 PM | /ANA\ /DNA\ " | Takan | | 20 | at | | (AM) (DM) | |
| Well on Line: Started 12/9 20 15 at 1:00 PM (AM) (PM) Taken 20 at (AM) (PM) | | | | | | | | | | | | | |
| OBSERVED SURFACE DATA Duration of Shut-in 24 Hours | | | | | | | | | | | | | |
| Static / Orifice | | Circle and | Pressure | Flowing Well Head | | Casing | | Tubing | | | | | |
| Dynamic Size Property (inches) | | Meter Prover Pres | Differential | Temperature | | l Wellhead Pressure | | Wellhead Pressure (P _w) or (P _r) or (P _c) | | Duratio (Hours | 7 | Liquid Produced | |
| | | psig (Pm | | t | t | psig | psia | (P _w) o | psia | (Hours |) (Barrels) | | |
| Shut-In | | | | _ | | 36 | P 2.2 | p+-g_ | | | | | |
| | | - | | | <u> </u> | 30 | | <u> </u> | | | | | |
| Flow | | | | | | | | | | | | | |
| | | | | | FLOW STR | EAM ATTRIE | UTES | | | 1 | | | |
| Plate Coefficient | | Circle one: | Press | Grav | _{/itv} | Temperature F | | viation Metered Flow | | GOR | | Flowing | |
| | | Meter or Prover Pressure | Extension | , Fact | tor T | | | actor | R | | Subic Feet/ | et/ Fluid Gravity | |
| (F _b) (F _p) Pro | | psia | psia P _m xh | | i) | Fig | | F _{pv} (Mcfd) | | Barrel) | | G _m | |
| _ | | | | | | | | | - | | | | |
| | l | | | | <u> </u> | | | | | | | | |
| | | | | • | , , | ERABILITY) | | | | | $(P_a)^2 =$ | 0.207 | |
| $(P_c)^2 = $ | | (P _w) ² | =: | $P_d =$ | ° | % (Р _с | - 14.4) - | + 14,4 = _ | :_ | | (P _d) ² =_ | | |
| (P _c) ² - (P _a) ² (P _c) ² - (P _w) ² 1. P _c ² - P _a ² | | | LOG of | I Backpressure Curv | | | | [] | | | Open Flow | | |
| or (P _a) ² - (P _d) ² | | 2. P _c ² -P _d ² | | formula 1. or 2. | | or | | n x LOG | | Antilo | ia i | Deliverability uals R x Antilog | |
| (¬ ¬ ¬ ¬ ¬ (¬ ¬) ~ | | | divided by: P2-P2 | | and divide P.2 - P.2 by: | | Assigned Standard Slope | | | | | (Mcfd) | |
| | | | | | | | | | - | | | | |
| | | | | _ | | | | _ | | | | | |
| | | | l | | | _ | | | | | | | |
| Open Flo | w | | Mcfd @ 14 | .65 psia | 55 psia Deliverability | | | Mcfd @ 14.65 psia | | | | | |
| The | undoroia | and nutharity | as bobalf of the | Company | stataa that h | s is duly out | harizad i | ta maka ti | no above rene | ert and that | t ha haa kr | outladas of | |
| 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 company of | | | | | | | | | | | | | |
| the facts stated therein, and that said report is true and correct. Executed this the day of, 20 | | | | | | | | | | | | | |
| Received | | | | | | | | | | | | | |
| Witness (if any) KANSAS CORPORATION COMMISSION For Company | | | | | | | | | | | | | |
| | | | | | | 2 1 201 | 5 | | | | | | |
| | | For Cor | mmission | | ~~··· | | ~ | | Che | cked by | | | |

CONSERVATION DIVISION WICHITA, KS

-, en I declare under penalty of perjury under the laws of the state of Kansas that I am authorized to request exempt status under Rule K.A.R. 82-3-304 on behalf of the operator __Foundation Energy Management, LLC and that the 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 of equipment installation and/or upon type of completion or upon use being made of the gas well herein named. I hereby request a one-year exemption from open flow testing for the _____BUCHOLTZ 11-06 gas well 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 I further agree to supply to the best of my ability any and all supporting documents deemed by Commission staff as necessary to corroborate this claim for exemption from testing. 12/16/2015 Date: Title: _____ HSE/Regulatory Tech

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.