FORM 17 Rev 11/20

State of Colorado
Energy & Carbon Management Commission

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BRADENHEAD TEST REPORT

Step 1. Before opening any valves, record all tubing and casing pressures as found.
Step 2. Collect liquid and gas samples as required; consult Bradenhead Testing and Reporting Instructions and Guidance for field specific Orders at http://ecmc/reg.html#/opguidance
Step 3. Conduct Bradenhead test.
Step 4. Submit Form 17 within 10 days of test. Attach a wellbore diagram if not previously submitted or if wellbore configuration has changed since last wellbore diagram was submitted.
Step 5. Submit sample analytical results via Form 43.

1. ECMC Operator Number: 96850 3. BLM Lease No:
2. Name of Operator: TEP ROCKY MOUNTAIN LLC
4. API Number; 05-045-19621-00 5. Multiple completion? ☐ Yes ☐ No
6. Well Name: GGU Swanson Number: 32A-29-691
7. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSE,29,6S,91W,6
8. County GARFIELD 9. Field Name: MAMM CREEK
10. Minerals: ☒ Fee ☐ State ☐ Federal ☐ Indian

11. Date of Test: 05/24/2024

12. Well Status: ☐ Flowing ☐ Shut In ☐ Gas Lift ☐ Pumping ☐ Injection ☐ Clock/Intermitter ☒ Plunger Lift

13. Number of Casing Strings: ☒ Two ☐ Three ☐ Liner?

14. EXISTING PRESSURES

Record all pressures as found	Tubing: 256 Fm:	Tubing: Fm:	Prod Csg 383 Fm:	Intermediate Csg:	Surf. Csg 169

BRADENHEAD TEST

With gauges monitoring production, intermediate casing and tubing pressures, open surface casing (Bradenhead) valve (if no intermediate casing, monitor only the production casing and tubing pressures.) Record pressures at five minute intervals.
Describe character of flow in "Bradenhead Flow" column: O = No Flow; C = Continuous; D = Down to 0; S = Surge; W = Whisper
Describe fluid type in "Bradenhead Fluid" column: H = Water H2O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None

Buried valve? ☐ Yes ☒ No
Confirmed open? ☒ Yes ☐ No

BRADENHEAD SAMPLE TAKEN?
☐ Yes ☒ No ☐ Gas ☐ Liquid

Character of Bradenhead fluid:
☐ Clear ☐ Fresh ☐ Sulfur ☐ Salty ☐ Black
Other:(describe)

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
00:00	256		383		CONTINUOUS	GAS
05:00	260		386		DOWN TO 0	GAS
10:00	261		386		WHISPER	GAS
15:00	263		387		WHISPER	GAS
20:00	265		386		WHISPER	GAS
25:00	266		387		WHISPER	GAS
30:00	368		387		WHISPER	GAS

REQUIRED - Instantaneous Bradenhead Pressure at End of Test: 0 PSIG

INTERMEDIATE CASING TEST

With gauges monitoring production, intermediate casing and tubing pressures, open the intermediate casing valve. Record pressures at five minute intervals.
Describe character of flow in “Intermediate Flow” column: O = No Flow; C = Continuous; D = Down to 0; S = Surge; W = Whisper
Describe fluid type in “Intermediate Fluid" column: H = Water H2O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None.

Buried valve? ☐ Yes ☐ No
Confirmed open? ☐ Yes ☐ No

INTERMEDIATE SAMPLE TAKEN?
☐ Yes ☐ No ☐ Gas ☐ Liquid

Character of Intermediate fluid:
☐ Clear ☐ Fresh
☐ Sulfur ☐ Salty ☐ Black
Other:(describe)

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow:	Intermediate Fluid:
00:00						
05:00						
10:00						
15:00						
20:00						
25:00						
30:00						

REQUIRED - Instantaneous Intermediate Casing Pressure at End of Test: _____ PSIG

Comments: This is an annual bradenhead test that was performed on Day Two of the seven-day shut-in period due to the bradenhead exceeding the threshold pressure. The bradenhead is connected to the flow line with an approved pressure management plan. The test was performed through a 2 inch valve.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Test Performed By: Kevin Bunker Title: Inspector Phone: (970) 783-8043

Signed: Shane Conner Title: Engineer Specialist Date: 5/28/2024

Witnessed By: _____ Title: _____ Agency: _____