

FORM 17 Rev 6/99	State of Colorado Oil and Gas Conservation Commission	 	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES	1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109 BRADENHEAD TEST REPORT Document Number: <u>402310681</u>
DE	ET	OE	ES					

Step 1. Record all tubing and casing pressures as found. Step 2. Sample now. If intermediate or surface casing pressure > 25 psi in sensitive areas, 1 psi.
 Step 3. Conduct Bradenhead test. Step 4. Conduct intermediate casing test. Step 5. Send report to BLM within 3 days and to OGCC within 10 days. Include wellbore diagram if not previously submitted or if wellbore configuration has changed since prior program. Attach gas and liquid analyses if sampled.

1. OGCC Operator Number: <u>96155</u> 3. BLM Lease No: _____ 2. Name of Operator: <u>WHITING OIL & GAS CORPORATION</u> 4. API Number; <u>05-123-43122-00</u> 5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No 6. Well Name: <u>Horsetail</u> Number: <u>30H-3116</u> 7. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SENE,30,10N,57W,6</u> 8. County <u>WELD</u> 9. Field Name: <u>WILDCAT</u> 10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	11. Date of Test: _____ 12. Well Status: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection <input type="checkbox"/> Clock/Intermitter <input type="checkbox"/> Plunger Lift 13. Number of Casing Strings: <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?
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14. EXISTING PRESSURES					
Record all pressures as found	Tubing: <u>N/A</u>	Tubing: <u>N/A</u>	Prod Csg <u>Ø</u>	Intermediate	Surf. Csg
	Fm: _____	Fm: _____	Fm: _____	Csg: <u>N/A</u>	<u>(-2.8)</u>

BRADENHEAD TEST						
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 Define characteristics of flow in "Bradenhead Flow" column using letter designations below: O = No Flow; C = Continuous; D = Down to 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:
BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	00:00	<u>N/A</u>	<u>N/A</u>	<u>Ø</u>	<u>N/A</u>	<u>0</u>
Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black	05:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
Other:(describe) Sample cylinder number: _____	10:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
	15:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
	20:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
	25:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
	30:00	↓	↓	<u>Ø</u>	↓	<u>0</u>
Instantaneous Bradenhead PSIG at end of test: > <u>Ø</u>						

INTERMEDIATE CASING TEST						
Buried valve? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed open? <input type="checkbox"/> Yes <input type="checkbox"/> No With gauges monitoring production, intermediate casing and tubing pressures, open the intermediate casing valve. Record pressures at five minute intervals Characterize flow in "Intermediate Flow" column using letter designations below: O = No Flow; C = Continuous; D = Down to 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	00:00					
Character of Intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black	05:00					
Other:(describe) Sample cylinder number: _____	10:00					
	15:00					
	20:00					
	25:00					
	30:00					
Instantaneous Intermediate Casing PSIG at end of test: >						

Comments: Bradenhead had a vacuum. No vapor or gas came out. Pressure equalized and stayed flat for the rest of test.

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

Test Performed By: Sean L. Jetter Title: Lead/Lease Operator Phone: () 970 302 1694

Signed:  Title: Lead/Lease Operator Date: 2/13/20

Witnessed By: _____ Title: _____ Agency: _____