

State of Colorado  
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

## BRADENHEAD TEST REPORT

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 30 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>10312</u>	11. Date of Test: <u>2/28/2020</u>
2. Name of Operator: <u>Prospect Energy LLC</u>	12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In
3. BLM Lease No: _____	<input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Injection
4. API Number: <u>05-069-06250</u>	<input type="checkbox"/> Clock/Intermittent
5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Plunger Lift
6. Well Name: <u>M550</u>	13. Number of Casing Strings: <input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liver?
7. Location (Qtr, Sec, Twp, Rng, Meridian): <u>SE SW SEC 19 T8N R6E W2</u>	
8. County: <u>Larimer</u>	
9. Field Name: <u>FT COLLINS</u>	
10. Minerals: <input type="checkbox"/> Fee <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	
14. STEP 1: EXISTING PRESSURES	
Record all pressures as found	15. STEP 2: See instructions above.
Tubing: <u>85</u>	
Fm: <u>Mddy</u>	
Tubing: _____	
Fm: _____	
Prod. Casing: <u>6</u>	
Fm: <u>Mddy</u>	
Intermediate Csg: _____	
Surface Casing: <u>15</u>	

16. STEP 3: BRADENHEAD TEST					
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: <u>85</u>	Fm: _____	Production Casing PSIG
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			Tubing	Tubing	Intermediate Casing PSIG
BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid		00:	<u>85</u>		<u>6</u>
Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh		05:	<u>85</u>		<u>6</u>
<input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black		10:	<u>85</u>		<u>6</u>
<input type="checkbox"/> Other: (describe) _____		15:	<u>85</u>		<u>6</u>
Sample cylinder number: _____		20:	<u>85</u>		<u>6</u>
		25:	<u>85</u>		<u>6</u>
		30:	<u>85</u>		<u>6</u>
					Note instantaneous Bradenhead PSIG at end of test: <u>&gt; 0</u>

17. STEP 4: INTERMEDIATE CASING TEST					
Buried valve? <input type="checkbox"/> Yes <input type="checkbox"/> No	Confirmed open? <input type="checkbox"/> Yes <input type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: _____	Fm: _____	Production Casing PSIG
With gauges monitoring production 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			Tubing	Tubing	Intermediate Casing PSIG
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid		00:			
Character of Intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh		05:			
<input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black		10:			
<input type="checkbox"/> Other: (describe) _____		15:			
Sample cylinder number: _____		20:			
		25:			
		30:			
					Note instantaneous Intermediate Casing PSIG at end of test: <u>&gt;</u>

18. Comments: <u>BRADENHEAD psi blew down to 0 psi in less than 1 min.</u>

19. STEP 5: See instructions above.

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

Test Performed by: Mike Starb Title: Lease Operator Phone: 307 299-2025

Signed: Michael A Starb Title: \_\_\_\_\_ Date: 2/28/2020

WITNESSED BY: \_\_\_\_\_ Title: \_\_\_\_\_ Agency: \_\_\_\_\_