

FORM
17
Rev 5/00State 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:		3. BLM Lease No:		11. Date of Test: 12-22-20													
2. Name of Operator: Foundation Energy		5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		12. Well Status: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Shut in													
4. API Number:		6. Well Name: Daney State		<input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection													
7. Location (Ctr, Sec, Twp, Rng, Meridian): SW NW Sec 16 T8N-R53W		8. County: Logan		<input type="checkbox"/> Clock/intermiller													
9. Field Name:		10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian		<input type="checkbox"/> Plunger Lift													
13. Number of Casing Strings:		14. STEP 1: EXISTING PRESSURES		15.													
<input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?		<table border="1"> <tr> <th>Record all pressures as found</th> <th>Tubing:</th> <th>Tubing:</th> <th>Prod. Casing:</th> <th>Intermediate Cag:</th> <th>Surface Casing:</th> </tr> <tr> <td>Fm: 0</td> <td>Fm: 0</td> <td>Fm: 0</td> <td>Fm: 0</td> <td>Fm: 0</td> <td>Fm: 0</td> </tr> </table>		Record all pressures as found	Tubing:	Tubing:	Prod. Casing:	Intermediate Cag:	Surface Casing:	Fm: 0	Fm: 0	Fm: 0	Fm: 0	Fm: 0	Fm: 0	STEP 2: See instructions above.	
Record all pressures as found	Tubing:	Tubing:	Prod. Casing:	Intermediate Cag:	Surface Casing:												
Fm: 0	Fm: 0	Fm: 0	Fm: 0	Fm: 0	Fm: 0												

16. STEP 3: BRADENHEAD 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: Tubing:	Fm: Tubing:	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow:
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 B; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other: (describe) _____ Sample cylinder number: _____		00:	0		0		0
		05:	0		0		0
		10:	0		0		0
		15:	0		0		0
		20:	0		0		0
		25:	0		0		0
		30:	0		0		0
		Note instantaneous Bradenhead PSIG at end of test: >					

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: Tubing:	Fm: Tubing:	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow:
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 B; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid Character of intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other: (describe) _____ Sample cylinder number: _____		00:					
		05:					
		10:					
		15:					
		20:					
		25:					
		30:					
		Note instantaneous Intermediate Casing PSIG at end of test: >					

18. Comments:

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: Signature Title: _____ Phone: _____