

State of Colorado  
Oil and Gas Conservation Commission  
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

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: 17180	11. Date of Test: 05-21-2021
2. Name of Operator: CITATION OIL & GAS CORP.	12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In
4. API Number: 05-017-06825-00	<input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Injection
5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Check/Intermittent
6. Well Name: UPRC Berge 42H-1	<input type="checkbox"/> Plunger Lift
7. Location (Qtr, Sec, Twp, Rng, Meridian): SENE Sec 1 TWP-13S Rge-51W	13. Number of Casing Strings: <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?
8. County: Cheyenne	
10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	

## STEP 1: EXISTING PRESSURES

Record all pressures as found	Tubing:	Prod. Casing:	Intermediate Csg:	Surface Casing:
	Fm: <u>Mrt 0-0</u>	Fm: <u>Mrt 0-0</u>		

15.

STEP 2: See instructions above.

## 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: Tubing:	Fm: Mrow 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 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas		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
Sample cylinder number: _____							

Note instantaneous Bradenhead PSIG at end of test: &gt;

## 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: Mrow 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 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas		00:					
		05:					
		10:					
		15:					
		20:					
		25:					
		30:					
Sample cylinder number: _____							

Note instantaneous Intermediate Casing PSIG at end of test: &gt;

18. Comments: \_\_\_\_\_

## 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: Bob Rogers

Title: Sr. Production Foreman Phone: (719) 340-1445

Signed: Bob Rogers

Title: \_\_\_\_\_

Date: 5-21-2021

WITNESSED BY: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_