



State of Colorado Oil and Gas Conservation Commission

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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 separate column, if psi.
Step 3: Conduct Bradenhead test.
Step 4: Conduct intermediate casing test.
Step 5: Send report to OGC within 30 days and to OGC within 10 days. Include wellbore diagram if not previously submitted or if wellbore configuration has changed since prior submission. Attach gas and liquid analyses if sampled.

1. OGC Operator Number:	2. Name of Operator: <u>Williford</u>	3. Well Lease No.:	11. Date of Test: <u>10/12/21</u>
4. API Number:	5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. Well Name: <u>Hazel #1</u>	12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut in
7. Location (Circle: Sec, Twp, Rng, Meridian): <u>9 4 12 33 12</u>	8. County: <u>La Plata</u>	9. Field Name:	<input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Injection
10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	13. Number of Casing Strings: <u>1</u>	14. STEP 1: EXISTING PRESSURES	<input type="checkbox"/> Plugger LR
Record all pressures as found:	Tubing: <u>14</u>	Prod. Casing: <u>2</u>	Intermediate Casing: <u>N/A</u>
15. STEP 3: BRADENHEAD TEST	16. STEP 2: See instructions above.	17. STEP 4: INTERMEDIATE CASING TEST	

15. STEP 3: BRADENHEAD TEST	16. STEP 2: See instructions above.	17. STEP 4: INTERMEDIATE CASING TEST
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Confirmed open? <input type="checkbox"/> Yes <input checked="" 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: D = No Flow; C = Continuous; D = Down to 0; V = Vapor; H = Water H ₂ O; M = Mud; W = Whimper; S = Surge; G = Gas BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" 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"/> Sulphur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other (describe): Sample cylinder number:	Exposed Time (min:sec) Fm. Tubing Fm. Tubing Production Casing PSIG Intermediate Casing PSIG Bradenhead Flow 00: 05: <u>16 sec</u> <u>14</u> <u>2</u> <u>D-W</u> 10: <u>14</u> <u>2</u> <u>W</u> 15: <u>14</u> <u>2</u> <u>W</u> 20: <u>14</u> <u>2</u> <u>W</u> 25: <u>14</u> <u>2</u> <u>W</u> 30: <u>14</u> <u>2</u> <u>W</u>	Note instantaneous Bradenhead PSIG at end of test: <u>TSTM</u>

17. STEP 4: INTERMEDIATE CASING TEST	18. Comments:
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Confirmed open? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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: D = No Flow; C = Continuous; D = Down to 0; V = Vapor; H = Water H ₂ O; M = Mud; W = Whimper; S = Surge; G = Gas INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" 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"/> Sulphur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other (describe): Sample cylinder number:	Exposed Time (min:sec) Fm. Tubing Fm. Tubing Production Casing PSIG Intermediate Casing PSIG Intermediate Flow 00: 05: 10: 15: 20: 25: 30:

18. 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: M. Tech Kennedy Title: Tech Phone: 970 238 1206
 Signed: [Signature] Title: Date: 10/12/21
 WITNESSED BY: Title: Agency: