

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2108 Fax: (303) 894-2109



FOR DECE USE ONLY

## BRADENHEAD TEST REPORT

Step 1. Before opening any valves, record all tubing and casing pressures as found.  
Step 2. Collect liquid and gas samples as required; consult Bradenhead Testing and Reporting Instructions and Guidance for field specific Orders at <http://ogccc.org/html/ogcguidance>  
Step 3. Conduct Bradenhead test.  
Step 4. Submit Form 17 within 10 days of test. Attach a wellbore diagram if not previously submitted or if wellbore configuration has changed since last wellbore diagram was submitted.  
Step 5. Submit sample analytical results via Form 43.

1. OGCC Operator Number: 16700	3. BLM Lease No:	11. Date of Test: 11/23/21
2. Name of Operator: CHEVRON USA INC		12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In
4. API Number: 05-103-09893	5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Injection
6. Well Name: Mager	Number: 1A	<input type="checkbox"/> Clock/Intermittent
7. Location (Qtr/Sec. Twp. Rng. Meridian): SE NE 1/4, 2N, 103W, 67th		<input type="checkbox"/> Plunger Lift
8. County: RIO BLANCO	9. Field Name: RANGELY	13. Number of Casing Strings: <input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?
10. Minerals: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian		
14. STEP 1: EXISTING PRESSURES		
Record all pressures as found	Tubing: 1876 Fm: WEBER	Prod. Casing: 1 Fm: WEBER
	Tubing: Fm:	Intermediate Csg: 517
		Surface Casing: 517
15. STEP 2: See instructions above.		

## BRADENHEAD TEST

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.  
Describe character of flow in "Bradenhead Flow" column: O = No Flow; C = Continuous; D = Down to D; S = Surge; W = Whisper  
Describe fluid type in "Bradenhead Fluid" column: H = Water H<sub>2</sub>O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None

Elapsed Time (Min:Sec)	Fm: WEBER Tubing	Fm: Tubing	Prod Csg PSIG	Intermediate Csg PSIG	Bradenhead Flow	Bradenhead Fluid
00:	1876	=	= 1		C	G
05:	1876	=	= 1		W	G
10:	1876	=	= 1		D	N
15:	1876	=	= 1		D	N
20:	1876	=	= 1		D	N
25:	1876	=	= 1		D	N
30:	1876	=	= 1		D	N

Instantaneous Bradenhead PSIG at end of test: > 0

## INTERMEDIATE CASING TEST

With gauges monitoring production, intermediate casing and tubing pressures, open the intermediate casing valve. Record pressures at five minute intervals.  
Describe character of flow in "Intermediate Flow" column: O = No Flow; C = Continuous; D = Down to D; S = Surge; W = Whisper  
Describe fluid type in "Intermediate Fluid" column: H = Water H<sub>2</sub>O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow	Intermediate Fluid
00:	=	=	=			
05:	=	=	=			
10:	=	=	=			
15:	=	=	=			
20:	=	=	=			
25:	=	=	=			
30:	=	=	=			

Instantaneous Intermediate Casing PSIG at end of test: >

18. Comments: Down to whisper in 5 seconds.

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: David Mann Title: PS Phone: 575 704 2292

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

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