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FORM
17
Rev 8/99State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



FOR OGC 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 OGC 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: 10758
 2. Name of Operator: Cap's Operating LLC
 3. BLM Lease No.:
 4. API Number: 05-071-08733-00
 5. Multiple completion? ☐ Yes ☒ No
 6. Well Name: Garden Eagle
 Number: 20-02
 7. Location (Qtr/Qt, Sec, Twp, Rng, Meridian): NW/1E 20-33S-67W
 8. County: Las Animas
 9. Field Name: Piedra Blanca River
 10. Minerals: ☒ Fee ☐ State ☐ Federal ☐ Indian
 11. Date of Test:

12. Well Status: ☐ Flowing ☐ Shut In
☐ Gas Lift ☒ Pumping ☐ Injection
☐ Cased/Intermittent ☐ Plunger Lift
 13. Number of Casing Strings: ☒ Two ☐ Three ☐ Line?
 14. STEP 1: EXISTING PRESSURES
 Record all pressures as found
 Tubing: Fm: 15 Intermediate Csg: 7 Surface Casing:
 15. STEP 2: See instructions above.

STEP 3: BRADENHEAD TEST

16. Buried valve? ☐ Yes ☒ No Confirmed open? ☒ Yes ☐ 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 H2O; M = Mud; W = Whisper; S = Surge; G = Gas
 BRADENHEAD SAMPLE TAKEN?
☐ Yes ☒ No ☐ Gas ☐ Liquid
 Character of Bradenhead fluid: ☐ Clear ☐ Fresh
☐ Sulfur ☐ Salty ☐ Black N/A
☐ Other: (describe)
 Sample cylinder number: N/A
 Note instantaneous Bradenhead PSIG at end of test: 0

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Casing	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow
00:	<u>15</u>		<u>7</u>		<u>0</u>
05:	<u>15</u>		<u>7</u>		<u>0</u>
10:	<u>15</u>		<u>7</u>		<u>0</u>
15:	<u>15</u>		<u>7</u>		<u>0</u>
20:	<u>15</u>		<u>8</u>		<u>0</u>
25:	<u>15</u>		<u>7</u>		<u>0</u>
30:	<u>15</u>		<u>7</u>		<u>0</u>

STEP 4: INTERMEDIATE CASING TEST

17. Buried valve? ☐ Yes ☐ No Confirmed open? ☐ Yes ☐ 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 H2O; M = Mud; W = Whisper; S = Surge; G = Gas
 INTERMEDIATE SAMPLE TAKEN?
☐ Yes ☐ No ☐ Gas ☐ Liquid
 Character of intermediate fluid: ☐ Clear ☐ Fresh
☐ Sulfur ☐ Salty ☐ Black
☐ Other: (describe)
 Sample cylinder number:
 Note instantaneous Intermediate Casing PSIG at end of test: >

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Casing	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow
00:					
05:					
10:					
15:					
20:					
25:					
30:					

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: Dakota Elhart Title: Pool Steward Phone: 719-447-0446Signed: Dakota Elhart Date: 5-2-22

WITNESSED BY: _____ Title: _____ Agency: _____