



## 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://cogcc/reg.html#opguidance>  
 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: \_\_\_\_\_ 3. BLM Lease No: C-03842  
 2. Name of Operator: \_\_\_\_\_  
 4. API Number: 05-045-05043 5. Multiple completion? Yes No  
 6. Well Name: PRAIRIE CANYON Well Number: 2B  
 7. Location (QtrQtr, Sec, Twp, Rng, Meridian): NE SW Sec. 31, T2S, 104W  
 8. County GARFIELD 9. Field Name: PRAIRIE CANYON  
 10. Minerals: Fee State ☒ Federal Indian

11. Date of Test: 5/4/22

12. Well Status: Flowing  
☒ Shut In Gas Lift  
 Pumping Injection  
 Clock/Intermittent  
 Plunger Lift

13. Number of Casing Strings:

☒ Two Three Liner?

## 14. EXISTING PRESSURES

Record all pressures as found	Tubing: <u>180</u> Fm: _____	Tubing: _____ Fm: _____	Prod Csg <u>180</u> Fm: _____	Intermediate Csg: _____	Surf. Csg <u>135</u>
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## 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 0; 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

Buried valve? Yes <input checked="" type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Prod Csg PSIG	Intermediate Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
Confirmed open? Yes No	0	180			180	C	N
BRADENHEAD SAMPLE TAKEN?	5	180			180	C	N
Yes <input checked="" type="checkbox"/> No Gas Liquid	10	180			180	D	N
Character of Bradenhead fluid:	15	180			180	O	N
Clear Fresh	20	180			180	O	N
Sulfur Salty Black	25	180			180	O	N
Other:(describe)	30	180			180	O	N
Instantaneous Bradenhead PSIG at end of test: > <u>0</u>							

## 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 0; 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.

Buried valve?      Yes      No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow:	Intermediate Fluid:
Confirmed open?      Yes      No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
INTERMEDIATE SAMPLE TAKEN? Yes      No      Gas      Liquid		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Character of Intermediate fluid:  Clear      Fresh Sulfur      Salty      Black Other:(describe) _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Instantaneous Intermediate Casing PSIG at end of test: > _____							

Comments:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Test Performed By: MIKE BARNES      Title: \_\_\_\_\_      Phone: (1) 970-986-7517

Signed: Mike Barnes      Title: \_\_\_\_\_      Date: 5/4/2022

Witnessed By: \_\_\_\_\_      Title: \_\_\_\_\_      Agency: \_\_\_\_\_