

FORM
17Rev
11/20

State of Colorado

Oil and Gas Conservation Commission

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



Document Number:

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: 51130

3. BLM Lease No: CO 2747

2. Name of Operator: Locin Oil Corporation

4. API Number: 65-103-07780 5. Multiple completion? Yes (No)

6. Well Name: North Douglas Crk. Fed. Number: 4-12-2-2

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): NW NW 12 25 102 W 6 PM

8. County: RIO BLANCO

9. Field Name: North Douglas Crk.

10. Minerals: Fee State

Federal Indian

11. Date of Test: 12/10/22

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: 0

Fm: 0

Tubing: 0

Fm: 0

Prod Csg 24

Fm: 0

Intermediate

Csg: 0

Surf. Csg

0

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 H₂O; 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	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
Confirmed open?	Yes	No	12:00	0	0	24		0	N
BRADENHEAD SAMPLE TAKEN?	No	Gas	12:05	0	0	24		0	N
Character of Bradenhead fluid:			12:10	0	0	24		0	N
Clear Fresh			12:15	0	0	24		0	N
Sulfur Salty Black			12:20	0	0	24		0	N
Other:(describe)			12:25	0	0	24		0	N
			12:30	0	0	24		0	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 0; S = Surge; W = Whisper

Describe fluid type in "Intermediate Fluid" column: H = Water H₂O; 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?				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Yes	No	Gas	Liquid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Character of Intermediate fluid:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Clear	Fresh			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Sulfur	Salty	Black		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Other:(describe)				<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: Larry Christian Title: Pumper Phone: () 970-675-8451
 Signed: Larry W. Christian Title: Pumper Date: 12/10/22
 Witnessed By: _____ Title: _____ Agency: _____