

FORM

17

Rev
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: 10724

3. BLM Lease No: _____

2. Name of Operator: NORTH SHORE EXPLORATION AND PRODUCTION

4. API Number: 05-081-07101

5. Multiple completion? Yes No

6. Well Name: EVANS FEDERAL

Number: 43-28

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): NESE,28,11N,93W,6

8. County MOFFAT

9. Field Name: TEARDROP

10. Minerals: Fee

State

Federal

Indian

11. Date of Test:

12-29-22

12. Well Status: X Flowing

Shut In Gas Lift

Pumping Injection

Clock/Intermitter

Plunger Lift

13. Number of Casing Strings:

Two

Three Liner?

14. EXISTING PRESSURES

Record all
pressures
as found

Tubing: 99.7

Tubing: _____

Prod Csg 372

Intermediate

Surf. Csg

Fm: _____

Fm: _____

Fm: _____

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 <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
		00:00	D 99.7	D	D 372		C	O
BRADENHEAD SAMPLE TAKEN?		5:17	D 99.5	D	D 372		C	O
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid <input type="checkbox"/>		10:21	D 99.5	D	D 372		C	O
Character of Bradenhead fluid:		15:16	D 99.5	D	D 372		C	O
Clear Fresh		20:21	D 99.6	D	D 372		C	O
Sulfur Salty Black		25:12	D 99.6	D	D 372		C	O
Other:(describe)		30:13	D 99.6	D	D 372		C	O
Instantaneous Bradenhead PSIG at end of test: >								

INTERMEDIATE CASING TEST

Date Run: 5/25/2021 Doc [#]

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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		D	D	D			
INTERMEDIATE SAMPLE TAKEN?				D	D	D			
Yes	No	Gas	Liquid	D	D	D			
Character of Intermediate fluid:				D	D	D			
Clear	Fresh			D	D	D			
Sulfur	Salty	Black		D	D	D			
Other:(describe)				D	D	D			
				D	D	D			
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: Oliver Wille Title: Pumper Phone: () 307-321-1299

Signed: [Signature] Title: Pumper Date: 12-29-22

Witnessed By: _____ Title: _____ Agency: _____