

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

DR

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 OGCC 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: 10679					11. Date of Test: 5/3/22	
2. Name of Operator: LOGOS Operating, LLC					12. Well Status: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Shut In	
3. BLM Lease No:					<input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection	
4. API Number: 05-067-05565					<input type="checkbox"/> Clock/Intermittent	
5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					<input type="checkbox"/> Plunger Lift	
6. Well Name: Bondad 33-10					13. Number of Casing Strings:	
7. Location (CtrQtr, Sec, Twp, Rng, Meridian): SESE, 33, 33N, 10W					<input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input checked="" type="checkbox"/> Liner?	
8. County: La Plata					15. STEP 2: See instructions above.	
9. Field Name: Ignacio Blanco						
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: <input checked="" type="checkbox"/> Fm:	Tubing: Fm:	Prod. Casing: 2 Fm:	Intermediate Cag: Fm:	Surface Casing: <input checked="" type="checkbox"/> Fm:	

16. STEP 3: BRADENHEAD TEST									
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow
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: O = No Flow; C = Continuous; D = Down to 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas				00:			2		0
				05:					
				10:					
				15:					
				20:					
				25:					
BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid				30:					
Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other: (describe)				Note instantaneous Bradenhead PSIG at end of test: > 0					
Sample cylinder number:									

17. STEP 4: INTERMEDIATE CASING TEST									
Buried valve? <input type="checkbox"/> Yes <input type="checkbox"/> No		Confirmed open? <input type="checkbox"/> Yes <input type="checkbox"/> No		Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow
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: O = No Flow; C = Continuous; D = Down to 0; V = Vapor H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas				00:					
				05:					
				10:					
				15:					
				20:					
				25:					
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid				30:					
Character of intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other: (describe)				Note instantaneous Intermediate Casing PSIG at end of test: >					
Sample cylinder number:									

18. Comments: 2" OFF CASING TO 1" VALVE, BH SHUT IN AT CONCLUSION OF TEST									

19. 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: JUSTIN PAYNE Title: LEASE OPERATOR Phone: 505 419 8603

Signed: [Signature] Title: Date: 5/3/22

WITNESSED BY: Title: Agency: