



**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://ecmc/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. ECMC Operator Number: <u>10699</u>	3. BLM Lease No: _____	11. Date of Test: <u>05/15/2024</u>
2. Name of Operator: <u>OWN RESOURCES OPERATING LLC</u>		12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In <input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection <input type="checkbox"/> Clock/Intermitter <input type="checkbox"/> Plunger Lift
4. API Number; <u>05-125-09377-00</u>	5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Well Name: <u>BARBER</u>	Number: <u>44-12 5N47W</u>	13. Number of Casing Strings: <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?
7. Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SESE,12,5N,47W,6</u>		
8. County <u>YUMA</u>	9. Field Name: <u>ROCK CREEK</u>	
10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian		

**14. EXISTING PRESSURES**

Record all pressures as found	Tubing: _____ Fm: _____	Tubing: _____ Fm: _____	Prod Csg <u>5</u> Fm: _____	Intermediate Csg: _____	Surf. Csg <u>0</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 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	00:00			5		NO FLOW	
<b>BRADENHEAD SAMPLE TAKEN?</b>	05:00						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	10:00						
Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black Other:(describe) _____	15:00						
	20:00						
	25:00						
	30:00						
REQUIRED - Instantaneous Bradenhead Pressure at End of Test: <u>0</u> PSIG							

### 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow:	Intermediate Fluid:
Confirmed open? <input type="checkbox"/> Yes <input type="checkbox"/> No	00:00						
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	05:00						
	10:00						
	15:00						
	20:00						
Character of Intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black Other:(describe) _____	25:00						
	30:00						
	REQUIRED - Instantaneous Intermediate Casing Pressure at End of Test: _____ PSIG						

Comments:

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

Test Performed By: Terrance Johnson Title: \_\_\_\_\_ Phone: ( ) 9703323585

Signed: Pat Dolezal Title: \_\_\_\_\_ Date: 5/17/2024

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