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.htm#/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 LLC
4. API Number; 05-081-07102-00 5. Multiple completion? Yes No
6. Well Name: EVANS FEDERAL Number: 22-28
7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENW, SEC 28, 11N, 93W, 6
8. County 9. Field Name:
10. Minerals: Fee State Federal Indian

11. Date of Test: 7-27-24
12. Well Status: ✓ 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: 93.2 Fm: LWIS | Tubing: Fm: | Prod Csg 349 Fm: LWIS | Intermediate Csg: | 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
Confirmed open? ✓ Yes No

BRADENHEAD SAMPLE TAKEN?
Yes ✓ No Gas Liquid

Character of Bradenhead fluid:
Clear Fresh
Sulfur Salty Black
Other:(describe)

| Elapsed Time (Min:Sec) | Fm: Tubing | Fm: Tubing: | Prod Csg PSIG | Intermedia Csg PSIG | Bradenhead Flow: | Bradenhead Fluid: |
|---|---|---|---|---|---|---|
| 00:00 | D 93.2 | D | D 349 | | 0 | 0 |
| 05:18 | D 93.1 | D | D 349 | | 0 | 0 |
| 10:24 | D 93.2 | D | D 349 | | 0 | 0 |
| 15:39 | D 93.1 | D | D 349 | | 0 | 0 |
| 20:44 | D 93.0 | D | D 349 | | 0 | 0 |
| 25:52 | D 93.0 | D | D 349 | | 0 | 0 |
| 31:01 | D 93.0 | D | D 349 | | 0 | 0 |

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

/ails.
escribe 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
Confirmed open? Yes No

INTERMEDIATE SAMPLE TAKEN?
Yes No Gas Liquid

Character of Intermediate fluid:
Clear Fresh
Sulfur Salty Black
Other:(describe)

| Elapsed Time (Min:Sec) | Fm: Tubing | Fm: Tubing: | Prod Csg PSIG | Intermediate Csg PSIG | Intermediate Flow: | Intermediate Fluid: |
|---|---|---|---|---|---|---|
| | D | D | D | | | |
| | D | D | D | | | |
| | D | D | D | | | |
| | D | D | D | | | |
| | D | D | D | | | |
| | 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: O Wille Title: Pumper Date: 7-27-24

Witnessed By: Title: Agency: