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FORM
17
Rev 8/99

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

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: _____		3. BLM Lease No: _____		11. Date of Test: <u>7-28-24</u>	
2. Name of Operator: _____		5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In	
4. API Number: _____		6. Well Name: <u>Bigfoot</u>		<input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection	
5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No		7. Location (QtrQtr, Sec, Twp, Rng, Meridian): _____		<input type="checkbox"/> Clock/Intermittent <input type="checkbox"/> Plunger Lift	
6. Well Name: <u>Bigfoot</u>		8. County: _____		13. Number of Casing Strings: _____	
7. Location (QtrQtr, Sec, Twp, Rng, Meridian): _____		9. Field Name: _____		<input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?	
8. County: _____		10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian		15. STEP 2: See instructions above.	
14. STEP 1: EXISTING PRESSURES					
Record all pressures as found	Tubing: Fm: _____	Tubing: Fm: <u>276</u>	Prod. Casing: Fm: <u>645</u>	Intermediate Csg: _____	Surface Casing: <u>0</u>

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						
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						
BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid						
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) _____						
Sample cylinder number: _____						
Elapsed Time (Min:Sec)	Fm: Tubing:	Fm: Tubing:	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow:	
00:		<u>276</u>	<u>645</u>		No flow	BH Fluid
05:		<u>256</u>	<u>645</u>		No flow	No fluid
10:		<u>243</u>	<u>645</u>		No flow	No fluid
15:		<u>244</u>	<u>645</u>		No flow	No fluid
20:		<u>250</u>	<u>650</u>		No flow	No fluid
25:		<u>256</u>	<u>650</u>		No flow	No fluid
30:		<u>240</u>	<u>650</u>		No flow	No fluid
Note instantaneous Bradenhead PSIG at end of test:						> <u>0</u>

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						
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						
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid						
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) _____						
Sample cylinder number: _____						
Elapsed Time (Min:Sec)	Fm: Tubing:	Fm: Tubing:	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow:	
00:						
05:						
10:						
15:						
20:						
25:						
30:						
Note instantaneous Intermediate Casing PSIG at end of test:						>

18. Comments: <u>Annual Bradenhead Test: NO Bradenhead psi observed.</u>
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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: Rudy Barraza Title: Production Supervisor Phone: 915-491-6311

Signed: _____ Title: _____ Date: _____

WITNESSED BY: _____ Title: _____ Agency: _____