FORM 17 Rev 6/99

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

FOR OGCC USE ONLY

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: 10779
2. Name of Operator: SCOUT ENERGY PARTNERS
3. BLM Lease No: D-032675
4. API Number: 05-103-01014
5. Multiple completion? ☐ Yes ☐ No
6. Well Name: A.C. McLaughlin Number: 53X
7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSW Section 14,T2N,R103W, 6TH P.M.
8. County: RIO BLANCO
9. Field Name: RANGELY WEBER SAND UNIT
10. Minerals: ☐ Fee ☐ State ☑ Federal ☐ Indian

11. Date of Test: 4-23-24

12. Well Status: ☐ Flowing ☐ Shut In ☐ Gas Lift ☑ Pumping ☐ Injection ☐ Clock/Intermitter ☐ Plunger Lift

13. Number of Casing Strings: ☑ Two ☐ Three ☐ Liner?

14. STEP 1: EXISTING PRESSURES

Record all pressures as found	Tubing: Fm:	Tubing: Fm:	Prod. Casing: Fm:	Intermediate Csg:	Surface Casing:
	200	200	160		15

15. STEP 2: See instructions above.

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)

Sample Cylinder Number:

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
00:	200		160		D	G
05:	200		160		D	W
10:	200		160		D	W
15:	200		160		D	W
20:	200		160		D	W
25:	200		160		D	W
30:	200		160		D	W

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 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
Confirmed open? ☐ Yes ☐ No

INTERMEDIATE SAMPLE TAKEN?
☐ Yes ☐ No ☐ Gas ☐ Liquid

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

Sample Cylinder Number:

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow:	Intermediate Fluid:
00:						
05:						
10:						
15:						
20:						
25:						
30:						

Instantaneous Intermediate Casing PSIG at end of test: >

18. Comments: Blew down 1 min 28 sec no flow

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: Cisco D. Lucero Title: Operator 2 Phone: 970-620-3459

Signed: [signature] Title: Operator 2 Date: 4-23-24

WITNESSED BY: _____ Title: _____ Agency: _____