

FORM
17Rev
11/20

State of Colorado

Energy & Carbon Management Commission

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



Document Number:

404189283

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: 10633 3. BLM Lease No: _____

2. Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

4. API Number: 05-123-09758-00 5. Multiple completion? ☐ Yes ☐ No

6. Well Name: JILLSON GAS UNIT Number: 1

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SESW,22,2N,68W,6

8. County WELD 9. Field Name: WATTENBERG

10. Minerals: ☐ Fee ☐ State ☐ Federal ☐ Indian

11. Date of Test: 04/29/2025

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: 300 Fm: _____	Tubing: _____ Fm: _____	Prod Csg 300 Fm: _____	Intermediate Csg: _____	Surf. Csg _____ 0
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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 = NoneBuried valve? ☐ Yes ☒ NoConfirmed open? ☒ Yes ☐ No

BRADENHEAD SAMPLE TAKEN?

☐ Yes ☒ No ☐ Gas ☐ Liquid

Character of Bradenhead fluid:

☐ Clear ☐ Fresh☐ Sulfur ☐ Salty ☐ BlackOther:(describe)

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
00:00	300		300		NO FLOW	NONE
05:00	300		300		NO FLOW	NONE
10:00	300		300		NO FLOW	NONE
15:00	300		300		NO FLOW	NONE
20:00	300		300		NO FLOW	NONE
25:00	300		300		NO FLOW	NONE
30:00	300		300		NO FLOW	NONE

REQUIRED - Instantaneous Bradenhead Pressure at End of Test: 0 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 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 type="checkbox"/> No Confirmed open? <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:
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	00:00						
	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: Pre-PA Release Bradenhead Test
WBD doc# 404095107 submitted on Form 6 doc# 404093203. Sample could not be collected due to no flow.

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

Test Performed By: Cap McClure Title: Field Technician Phone: (307) 272-8156

Signed: Stephany Olsen Title: Senior Regulatory Analyst Date: 5/6/2025

Witnessed By: _____ Title: _____ Agency: _____