



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: 10539 3. BLM Lease No: COC 021408
 2. Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP
 4. API Number; 05-103-08754-00 5. Multiple completion? Yes No
 6. Well Name: FEDERAL Number: N-34-3-101-S
 7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SESW,34,3S,101W,6
 8. County RIO BLANCO 9. Field Name: CATHEDRAL
 10. Minerals: Fee State Federal Indian

11. Date of Test: 05/26/2026
 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: <u>381</u> Fm: _____	Tubing: _____ Fm: _____	Prod Csg <u>381</u> Fm: _____	Intermediate Csg: <u>0</u>	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 Confirmed open? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 Other:(describe) _____	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
	00:00	381		381	0	NO FLOW	NONE
	05:00	381		381	0	NO FLOW	NONE
	10:00	381		381	0	NO FLOW	NONE
	15:00	381		381	0	NO FLOW	NONE
	20:00	381		381	0	NO FLOW	NONE
	25:00	381		381	0	NO FLOW	NONE
	30:00	381		381	0	NO FLOW	NONE
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 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 Confirmed open? <input checked="" 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:
	00:00	381		381		NO FLOW	VAPOR
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	05:00	381		381		NO FLOW	VAPOR
	10:00	381		381		NO FLOW	VAPOR
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) _____	15:00	381		381		NO FLOW	VAPOR
	20:00	381		381		NO FLOW	VAPOR
	25:00	381		381		NO FLOW	VAPOR
	30:00	381		381		NO FLOW	VAPOR
REQUIRED - Instantaneous Intermediate Casing Pressure at End of Test: <u>0</u> PSIG							

Comments: Annual Inspection

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

Test Performed By: Dan Fiscus Title: Lease Operator Phone: (970) 675-4400
 Signed: Tami Dahl Title: Production Tech Date: 5/27/2026
 Witnessed By: _____ Title: _____ Agency: _____