

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: <u>10084</u>	3. SLM Lease No: <u>N/A</u>	11. Date of Test: <u>11/27/11</u>						
2. Name of Operator: <u>Pioneer Natural Resource</u>	5. Multiple completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut In						
4. API Number: <u>05-071-08465</u>	Number: <u>22-13 TR</u>	<input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection						
6. Well Name: <u>King</u>	7. Location (OffQtr, Sec, Twp, Rng, Meridian): <u>SE1/4NW Sec 13-32S-66W</u>	<input type="checkbox"/> Clock/Intermediate <input type="checkbox"/> Plunger Lift						
8. County: <u>Las Animas</u>	9. Field Name: <u>Durgatore River</u>	13. Number of Casing Strings: <input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?						
10. Minerals: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	14. STEP 1: EXISTING PRESSURES							
<table border="1"><tr><td>Record all pressures as found</td><td>Tubing: Fm: <u>36</u></td><td>Tubing: Fm: <u>9</u></td><td>Prod. Casing: Fm: <u>9</u></td><td>Intermediate Cag: <u>9</u></td><td>Surface Casing: <u>0</u></td></tr></table>			Record all pressures as found	Tubing: Fm: <u>36</u>	Tubing: Fm: <u>9</u>	Prod. Casing: Fm: <u>9</u>	Intermediate Cag: <u>9</u>	Surface Casing: <u>0</u>
Record all pressures as found	Tubing: Fm: <u>36</u>	Tubing: Fm: <u>9</u>	Prod. Casing: Fm: <u>9</u>	Intermediate Cag: <u>9</u>	Surface Casing: <u>0</u>			
15. STEP 2: See instructions above.								

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	Elapsed Time (Min Sec)	Fm: Tubing	Fm: Tubing	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow
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		00:	<u>36</u>	<u>9</u>	<u>0</u>		
		05:					
		10:					
		15:					
		20:					
		25:					
BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid		30:					
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) _____		Note instantaneous Bradenhead PSIG at end of test: >					
Sample cylinder number: _____							

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	Elapsed Time (Min Sec)	Fm: Tubing	Fm: Tubing	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow
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		00:					7523
		05:					8088
		10:					8545
		15:					
		20:					
		25:					
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid		30:					
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) _____		Note instantaneous Intermediate Casing PSIG at end of test: >					
Sample cylinder number: _____							

18. Comments: _____ _____ _____
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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: Brian G. Smith Title: Pumper Phone: 719-680-9524

Signed: B. G. Smith Title: \_\_\_\_\_ Date: 11/27/11

WITNESSED BY: \_\_\_\_\_ Title: \_\_\_\_\_ Agency: \_\_\_\_\_