

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. 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: 100185  
2. Name of Operator: Encan Oil and Gas  
3. BLM Lease No:  
4. API Number: 05-123-20918  
5. Multiple completion? ☐ Yes ☐ No  
6. Well Name: Seltzer 24-34  
Number: 24-34  
7. Location (CtrQtr, Sec, Twp, Rng, Meridian): SESW 34 1N 87W 6 PM  
8. County: Weld  
9. Field Name: Wattenberg  
10. Minerals: ☒ Fee ☐ State ☐ Federal ☐ Indian

11. Date of Test: 2/10/16

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

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

14. STEP 1: EXISTING PRESSURES

Record all pressures as found	Tubing:	Tubing: 24	Prod. Casing: 47	Intermediate Csg:	Surface Casing: 0
	Fm:	Fm: J-Sand	Fm: J-Sand		

15. STEP 2: See instructions above.

16. STEP 3: BRADENHEAD TEST

Elapsed Time (Min Sec)	Fm: Tubing	Fm: J-Sand Tubing	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow
00:		24	47		W
05:		26	47		O
10:		29	47		O
15:		35	47		O
20:		35	47		O
25:		35	47		O
30:		35	47		O
Note Instantaneous Bradenhead PSIG at end of test:					> 0

17. STEP 4: INTERMEDIATE CASING TEST

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:  
VERIFIED PRESSURE AT 0 PSI. BRADENHEAD OPENED AND A SHORT WHISPER WAS HEARD AND QUICKLY WENT AWAY. NO FLOW DURING THE TEST. COGCC INSPECTOR JOE MACLAREN WITNESSED AND CREATED INSPECTION DOCUMENT # 674602338

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: CHRIS OVERMAN Title: CREW LEAD Phone: 303-659-8007

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

WITNESSED BY: [Signature] Title: INTL Inspector Agency: ColoGCC