

FORM 17
Rev 6/99

State of Colorado
Oil and Gas Conservation Commission

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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 3 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: 74165 3. BLM Lease No: _____
 2. Name of Operator: RENEGADE OIL & GAS COMPANY LLC
 4. API Number: 05-005-06921-00 5. Multiple completion? Yes No
 6. Well Name: SCHROTH-UPRR Number: 22-21
 7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENW,21,5S,62W,6
 8. County ARAPAHOE 9. Field Name: PRONGHORN
 10. Minerals: Fee State Federal Indian

11. Date of Test: 06/10/2019
 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: _____	Tubing: <u>230</u>	Prod Csg <u>440</u>	Intermediate	Surf. Csg
	Fm: _____	Fm: <u>JSand</u>	Fm: <u>JSand</u>	Csg: _____	<u>0</u>

BRADENHEAD TEST

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:
00:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
05:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
10:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
15:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
20:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
25:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>
30:00	<input type="checkbox"/>	<input type="checkbox"/> <u>230</u>	<input type="checkbox"/> <u>440</u>		<input type="checkbox"/> <u>0</u>

Instantaneous Bradenhead PSIG at end of test: > 0

INTERMEDIATE CASING TEST

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:
00:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
05:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
25:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
30:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Instantaneous Intermediate Casing PSIG at end of test: >