

Conoco Phillips, State Bierstadt 4-65 35-34 1DH
005-07295

Inspection #688305759

9/12/2019

Annual Bradenhead Test Inspection



ConocoPhillips

STATE BIERSTADT 4-65 35-34 1DH

NE/NE SEC. 35 TWP: 4S RNG:65W

ARAPAHOE COUNTY, CO. ELEVATION 5870.8'

-ACCESS LOCATION FROM WATKINS and YALE

24 HR. CONOCO PHILLIPS CONTACT: 1-855-595-8258

LOCAL EMERGENCY SERVICES: 911 NO SMOKING

Colorado Oil and Gas Conservation Commission

39 66398, -104 62466, 5820.2ft, 267°

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Colorado Oil and Gas Conservation Commission
39.66387, -104.62461, 5807.1ft, 50°
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Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80202 (303) 894-2100 Fax: (303) 894-2109

BRADENHEAD TEST REPORT

Step 1: Record all tubing and casing pressures as found.
Step 2: Sample flow, 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: 19160 2. BLM Lease No: 25-001-2211-00 3. Multiple completion? ☐ Yes ☒ No
4. API Number: 25-001-2211-00 5. Number: 4-61 35-34 10H
6. Well Name: 35-45 62W NEMO
7. Location (Quad, Sec, Twp, Rng, Meridian): 35-45 62W NEMO
8. County: ARMARKE 9. Field Name: OT HORIZONTAL MODERATE
10. Minerals: ☒ Fee ☐ State ☐ Federal ☐ Indian
11. Date of Test: 9/12/19
12. Well Status: ☐ Flowing ☐ Shut In
☐ Gas Lift ☐ Pumping ☐ Injection
☐ Plug/Interruption ☐ Plunger Lift
13. Number of Casing Strings: ☐ Two ☐ Three ☐ Other?
14. STEP 1: EXISTING PRESSURES
Record all pressures as found
Tubing: Fm: 100 To: 154 Intermediate Casing: 154 Surface Casing: -3
15. STEP 2: See instructions above.

STEP 3: BRADENHEAD TEST

16. Buried valve? ☒ Yes ☐ No Confirmed open? ☒ Yes ☐ No
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.
D = No Flow; C = Continuous; D = Down to 0; V = Vapor
H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas
BRADENHEAD SAMPLE TAKEN?
☐ Yes ☒ No ☐ Gas ☐ Liquid
Character of Bradenhead fluid: ☐ Clear ☐ Fresh
☐ Sulfur ☐ Salty ☐ Black
☐ Other: (describe) n/a
Sample cylinder number: _____
Note instantaneous Bradenhead PSIG at end of test: 0

Elapsed Time (Min Sec)	Fm. Tubing	Fm. Tubing	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow
00:					
05:	<u>108</u>		<u>137</u>		<u>0</u>
10:	<u>114</u>		<u>186</u>		<u>0</u>
15:	<u>112</u>		<u>188</u>		<u>0</u>
20:	<u>125</u>		<u>208</u>		<u>.1</u>
25:	<u>117</u>		<u>158</u>		<u>-2</u>
30:	<u>92</u>		<u>100</u>		<u>-2</u>
35:	<u>83</u>		<u>84</u>		<u>-2</u>

STEP 4: INTERMEDIATE CASING TEST

17. Buried valve? ☐ Yes ☐ No Confirmed open? ☐ Yes ☐ No
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.
D = No Flow; C = Continuous; D = Down to 0; V = Vapor
H = Water H2O; M = Mud; W = Whisper; S = Surge; G = Gas
INTERMEDIATE SAMPLE TAKEN?
☐ Yes ☐ No ☐ Gas ☐ Liquid
Character of Intermediate fluid: ☐ Clear ☐ Fresh
☐ Sulfur ☐ Salty ☐ Black
☐ Other: (describe) _____
Sample cylinder number: _____
Note instantaneous Intermediate Casing PSIG at end of test: _____

Elapsed Time (Min Sec)	Fm. Tubing	Fm. Tubing	Production Casing PSIG	Intermediate Casing PSIG	Intermediate Flow
00:					
05:					
10:					
15:					
20:					
25:					
30:					

18. Comments: _____

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: Nader Oulamhisen Title: Production Lead Phone: 820-776-6247
Signed: [Signature] Title: _____ Date: 9/12/19
WITNESSED BY: [Signature] Title: Field Inspector Agency: COGCC

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39.6639, -104.62447, 5800.5ft, 105°

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