

# 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.

11. Date of Test: 4-26-21

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

13. Number of Casing Strings: N/A  
☐ Two ☐ Three ☐ Liner?

1. OGCC Operator Number: 10112

2. Name of Operator: Foundation Energy Management

3. BLM Lease No: \_\_\_\_\_

4. API Number: \_\_\_\_\_

5. Multiple completion? ☐ Yes ☒ No

6. Well Name: Gardner Number: 42-28

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENE Sec. 28-T1N-R46W

8. County: Yuma

9. Field Name: \_\_\_\_\_

10. Minerals: ☐ Fee ☐ State ☐ Federal ☐ Indian

14. STEP 1: EXISTING PRESSURES

Record all pressures as found	Tubing:	Tubing:	Prod. Casing:	Intermediate Csg:	Surface Casing:
	Fm: <u>125</u>	Fm: _____	Fm: <u>125</u>	_____	<u>0</u>

15. STEP 2: See instructions above.

16. STEP 3: BRADENHEAD TEST

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:  
O = 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) \_\_\_\_\_

Sample cylinder number: \_\_\_\_\_

Elapsed Time (Min:Sec)	Fm: Tubing:	Fm: Tubing:	Production Casing PSIG	Intermediate Casing PSIG	Bradenhead Flow:
00:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
05:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
10:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
15:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
20:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
25:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>
30:	<u>125</u>	_____	<u>125</u>	_____	<u>0</u>

Note instantaneous Bradenhead PSIG at end of test: >

17. STEP 4: INTERMEDIATE CASING TEST

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:  
O = 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: \_\_\_\_\_

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: This well has a hole in tubing

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: Mike Beargeon Title: Pumper Phone: 970-630-4324

Signed: Mike Beargeon Title: \_\_\_\_\_ Date: 4-26-21

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