

Form
17
Rev. 08/01

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

BRADENHEAD TEST REPORT

Step 1: Record all tubing and casing pressures as tubing.
Step 2: Sample flow, if intermediate or surface casing pressure >25 psi in production or >1 psi in shut-in.
Step 3: Conduct Bradenhead test.
Step 4: Conduct intermediate casing test.
Step 5: Send report to BLM within 30 days and to OGC within 12 days. Include wellbore diagram & test previously conducted or if test time configuration has changed since prior program. Attach gas and liquid analysis if sampled.

1. OGC Operator Number:	2. Name of Operator: <u>Williford</u>	3. BLM Lease No:	11. Date of Test: <u>10/12/21</u>
4. APT Number:	5. Multiple Completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. Well Name: <u>Hazel #2</u>	12. Well Status: <input type="checkbox"/> Flowing <input type="checkbox"/> Shut-in <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Injection <input type="checkbox"/> Choke/Interruption <input type="checkbox"/> Plunger Lift
7. Location (County, Sec, Twp, Rng, Meridian):	8. County: <u>La Plata</u>	9. Field Name:	13. Number of Casing Strings: <input type="checkbox"/> Two <input checked="" type="checkbox"/> Three <input type="checkbox"/> Other
10. Minerals: <input type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	14. STEP 3: EXISTING PRESSURES		
Record all pressures as tubing	Tubing: Pm: <u>12</u>	Intermediate Casing: Pm: <u>2.5</u>	Surface Casing: Pm: <u>11.9#</u>
15. STEP 2: See instructions above:			

16. STEP 3: BRADENHEAD TEST					
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Confined open? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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; S = Down to B; V = Vapor; H = Water H ₂ O; M = Mud; W = Whimper; Z = Surge; G = Gas BRADENHEAD SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid Character of Bradenhead fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Frothy <input type="checkbox"/> Sulphur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other (describe): Sample cylinder number:	Elapsed Time (Min:Sec) 00: <u>Puff</u> 05: <u>12</u> 10: <u>12</u> 15: <u>12</u> 20: <u>12</u> 25: <u>12</u> 30: <u>12</u>	Pm: Tubing 12 12 12 12 12 12	Production Casing PSIG 2.5 2.5 2.5 2.5 2.5 2.5	Intermediate Casing PSIG 2.5 2.5 2.5 2.5 2.5 2.5	Bradenhead Flow D-W W W W W W
Note instantaneous Bradenhead PSIG at end of test: <u>TSTM</u>					

17. STEP 4: INTERMEDIATE CASING TEST					
Buried valve? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Confined open? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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; S = Down to B; V = Vapor; H = Water H ₂ O; M = Mud; W = Whimper; Z = Surge; G = Gas INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid Character of intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Frothy <input type="checkbox"/> Sulphur <input type="checkbox"/> Salty <input type="checkbox"/> Black <input type="checkbox"/> Other (describe): Sample cylinder number:	Elapsed Time (Min:Sec) 00: <u>1 sec</u> 05: <u>12</u> 10: <u>12</u> 15: <u>12</u> 20: <u>12</u> 25: <u>12</u> 30: <u>12</u>	Pm: Tubing 12 12 12 12 12 12	Production Casing PSIG 2.5 2.5 2.5 2.5 2.5 2.5	Intermediate Casing PSIG 2.5 2.5 2.5 2.5 2.5 2.5	Intermediate Flow D-W W W W W W
Note instantaneous Intermediate Casing PSIG at end of test: <u>TSTM</u>					

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: Mitch Kennedy Title: Tech Phone: 970 238 1206
 Signed: [Signature] Date: 10/12/21
 Title: _____ Agency: _____