



## BRADENHEAD TEST REPORT

Step 1. Before opening any valves, record all tubing and casing pressures as found.

Step 2. Collect liquid and gas samples as required; consult Bradenhead Testing and Reporting Instructions and Guidance for field specific Orders at

<http://ecmc/reg.html#/opguidance>

Step 3. Conduct Bradenhead test.

Step 4. Submit Form 17 within 10 days of test. Attach a wellbore diagram if not previously submitted or if wellbore configuration has changed since last wellbore diagram was submitted.

Step 5. Submit sample analytical results via Form 43.

1. ECMC Operator Number: 10456 3. BLM Lease No: \_\_\_\_\_

2. Name of Operator: CAERUS PICEANCE LLC

4. API Number; 05-045-08212-00 5. Multiple completion? ☐ Yes ☐ No

6. Well Name: CHEVRON Number: 42-8

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENE,8,6S,96W,6

8. County GARFIELD 9. Field Name: GRAND VALLEY

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

11. Date of Test: 06/26/2024

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: 240 Fm: _____	Tubing: _____ Fm: _____	Prod Csg 240 Fm: _____	Intermediate Csg: _____	Surf. Csg 530
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## BRADENHEAD TEST

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.

Describe character of flow in "Bradenhead Flow" column: O = No Flow; C = Continuous; D = Down to 0; S = Surge; W = Whisper

Describe fluid type in "Bradenhead Fluid" column: H = Water H<sub>2</sub>O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
00:00	240		240		CONTINUOUS	GAS
05:00	240		240		SURGE	GAS
10:00	240		240		SURGE	GAS
15:00	240		240		SURGE	GAS
20:00	240		240		SURGE	GAS
25:00	240		240		SURGE	GAS
30:00	240		240		SURGE	GAS
REQUIRED - Instantaneous Bradenhead Pressure at End of Test: 4 PSIG						

Buried valve? ☐ Yes ☒ No

Confirmed open? ☒ Yes ☐ No

BRADENHEAD SAMPLE TAKEN?

☐ Yes ☒ No ☐ Gas ☐ Liquid

Character of Bradenhead fluid:

☐ Clear ☐ Fresh

☐ Sulfur ☐ Salty ☐ Black

Other:(describe)

## INTERMEDIATE CASING TEST

With gauges monitoring production, intermediate casing and tubing pressures, open the intermediate casing valve. Record pressures at five minute intervals.

Describe character of flow in "Intermediate Flow" column: O = No Flow; C = Continuous; D = Down to 0; S = Surge; W = Whisper

Describe fluid type in "Intermediate Fluid" column: H = Water H<sub>2</sub>O; M = Mud; G = Gas; V = Vapor; L = Liquid Hydrocarbon; H & M = Water & Mud; H & G = Water & Gas; H & V = Water & Vapor; M & G = Mud & Gas; M & V = Mud & Vapor; G & V = Gas & Vapor; H & L = Water & Liquid Hydrocarbon; M & L = Mud & Liquid Hydrocarbon; G & L = Gas & Liquid Hydrocarbon; V & L = Vapor & Liquid Hydrocarbon; N = None.

Buried valve? <input type="checkbox"/> Yes <input type="checkbox"/> No	Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermediate Csg PSIG	Intermediate Flow:	Intermediate Fluid:
Confirmed open? <input type="checkbox"/> Yes <input type="checkbox"/> No	00:00						
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	05:00						
	10:00						
	15:00						
Character of Intermediate fluid: <input type="checkbox"/> Clear <input type="checkbox"/> Fresh <input type="checkbox"/> Sulfur <input type="checkbox"/> Salty <input type="checkbox"/> Black Other:(describe) _____	20:00						
	25:00						
	30:00						
	REQUIRED - Instantaneous Intermediate Casing Pressure at End of Test: _____ PSIG						

Comments: Annual Test

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Test Performed By: <u>Clint Knox</u>	Title: <u>Foreman</u>	Phone: <u>( )</u>
Signed: <u>Ally Ota</u>	Title: <u>Regulatory Analyst</u>	Date: <u>6/27/2024</u>
Witnessed By: _____	Title: _____	Agency: _____