



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: 10133 3. BLM Lease No: _____

2. Name of Operator: HILCORP ENERGY COMPANY

4. API Number; 05-067-06664-00 5. Multiple completion? ☐ Yes ☐ No

6. Well Name: PARGIN Number: 1

7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNE,36,33N,7W,N

8. County LA PLATA 9. Field Name: IGNACIO BLANCO

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

11. Date of Test: 06/27/2025

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: 82 Fm: _____	Tubing: _____ Fm: _____	Prod Csg 84 Fm: _____	Intermediate Csg: 2	Surf. Csg 3
-------------------------------	-------------------------	----------------------------	--------------------------	------------------------	----------------

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 H₂O; 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 = NoneBuried valve? ☐ Yes ☒ NoConfirmed open? ☒ Yes ☐ No

BRADENHEAD SAMPLE TAKEN?

☐ Yes ☒ No ☐ Gas ☐ Liquid

Character of Bradenhead fluid:

☐ Clear ☐ Fresh☐ Sulfur ☐ Salty ☐ Black

Other:(describe)

Elapsed Time (Min:Sec)	Fm: Tubing	Fm: Tubing:	Prod Csg PSIG	Intermedia Csg PSIG	Bradenhead Flow:	Bradenhead Fluid:
00:02	82		84	2	DOWN TO 0	
05:00	82		84	2	NO FLOW	
10:00	82		85	2	NO FLOW	
15:00	83		85	2	NO FLOW	
20:00	84		86	2	NO FLOW	
25:00	78		84	2	NO FLOW	
30:00	74		81	2	NO FLOW	

REQUIRED - Instantaneous Bradenhead Pressure at End of Test: 0 PSIG

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 H₂O; 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 checked="" type="checkbox"/> No Confirmed open? <input checked="" 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:
	00:02	68		81	0	DOWN TO 0	
INTERMEDIATE SAMPLE TAKEN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas <input type="checkbox"/> Liquid	05:00	68		80	0	NO FLOW	
	10:00	60		79	0	NO FLOW	
	15:00	50		76	0	NO FLOW	
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	55		76	0	NO FLOW	
	25:00	61		75	0	NO FLOW	
	30:00	66		76	0	NO FLOW	
	REQUIRED - Instantaneous Intermediate Casing Pressure at End of Test: <u>0</u> PSIG						

Comments:

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

Test Performed By: Logan Frost Title: Operator Phone: ()

Signed: Priscilla Shorty Title: OperationsRegulatory Tech Date: 6/30/2025

Witnessed By: _____ Title: _____ Agency: _____