

State of Colorado
Oil and Gas Conservation Commission

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



FOR OGC 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

1. OGCC Operator Number: 10084	11. Date of Test: 10-7-15
2. Name of Operator: Pioneer Natural Resources USA INC	12. Well Status: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Shut In
3. BLM Lease No:	<input type="checkbox"/> Gas Lift <input type="checkbox"/> Pumping <input type="checkbox"/> Injection
4. API Number: 0501 09434-000	<input type="checkbox"/> Clock/Intermittent
5. Multiple completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Plunger Lift
6. Well Name: Lorenzo	13. Number of Casing Strings: <input checked="" type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Liner?
7. Location (CirQtr, Sec, Twp, Rng, Meridian): N41SW1 5 34S 66W	
8. County: Las Animas	
9. Field Name: Purgatoire River	
10. Minerals: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian	

14. STEP 1: EXISTING PRESSURES

Record all pressures as found	Tubing: <input checked="" type="checkbox"/> Fm	Tubing: <input checked="" type="checkbox"/> Fm	Prod Casing: <input checked="" type="checkbox"/> Fm	Intermediate Csg: <input checked="" type="checkbox"/> Fm	Surface Casing: <input checked="" type="checkbox"/> Fm
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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
D = No Flow; C = Continuous; D = Down to 0; V = Vapor
H = Water H2O; M = Mud; W = Whimper; S = Surge; G = Gas

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

BRADENHEAD SAMPLE TAKEN? ☐ Yes ☒ No ☐ Gas ☐ Liquid

Character of Bradenhead fluid: ☐ Clear ☐ Fresh ☐ Sulfur ☐ Salty ☐ Black ☐ Other (describe)

Sample cylinder number:

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
D = No Flow; C = Continuous; D = Down to 0; V = Vapor
H = Water H2O; M = Mud; W = Whimper; S = Surge; G = Gas

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

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 >

18. Comments: No pressure on Bradenhead

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: Bruton Miggins Title: _____ Phone: 719-859-15

Signed: Bruton Miggins Title: _____ Date: 10-7-15

WITNESSED BY: _____ Title: _____ Agency: _____