



NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE
1000 RIO BRAZOS ROAD
AZTEC NM 87410
(505) 334-6178 FAX: (505) 334-6170
[http://emnrd.state.nm.us/ocd/District III/3district.htm](http://emnrd.state.nm.us/ocd/District%20III/3district.htm)

BRADENHEAD TEST REPORT

(submit 1 copy to above address)

Date of Test 5/23/07 Operator BP America Prod Co API #30-0 45-27535
Property Name Federal 32 6 9 Well No. 1 Location: Unit A Sec 9 Twp 32N Rng 06W
Well Status(Producing) Initial PSI: Tubing 91 Intermediate Casing 91 Bradenhead 0

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

Testing	PRESSURE				
	Bradenhead		INTERM		
	BH	Int	Csg	Int	Csg
TIME	0		91		
5 min					
10 min					
15 min					
20 min					
25 min					
30 min					

	FLOW CHARACTERISTICS	
	BRADENHEAD	INTERMEDIATE
Steady Flow		
Surges		
Down to Nothing		
Nothing	X	
Gas		
Gas & Water		
Water		
	OIL CONS. DIV DIST. 3	

If bradenhead flowed water, check all of the descriptions that apply below:

JUL 29 2014

CLEAR FRESH SALTY SULFUR BLACK

5 MINUTE SHUT-IN PRESSURE BRADENHEAD INTERMEDIATE

REMARKS:

NMOCD form completed by Chris Sandoz on 7/24/14 based on COGCC form dated 5/23/07

By Jody Garner

Witness

Tech
(Position)

E-mail address

BLM - CO₂ Colorado Bradenhead Test Report

Witness: _____
 Well Name/Number: Federal 32-6-9 No.1 API# 3004527525
 Fm ()
 Fm ()
 A# 1 Fm () Operator: BP America Critical Area: _____ Date: 5/23/07
 A# 1 Fm () Q/A VENE SEC: 9 Twn: 32 Rng: 6 Fed / Ind / State / Fed / Mineral

Well Status (circle one): Flowing Shut-In Clock/Intermittent Gas Lift Pumping Injection Plunger Lift

Number of Casing Strings (circle one): Three Liner

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, 5 PSI.)

STEP 3: BRADENHEAD TEST

Buried Valve? No Confirmed open? _____

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 pressure.) Record pressures at five minute intervals. Define characteristics of flow in "Bradenhead Flow" column using letter designations below:

0 = No flow; C = Continuous; D = Down to 0; V = Vapor; 1 = Water H₂O; M = Mud; W = Whisper; S = Surge; G = Gas

BRADENHEAD SAMPLE TAKEN (circle)

Yes No Gas Liquid

Character of Bradenhead Fluid:

Clear Fresh Salty Sulfur Black _____

Sample Cylinder Number: _____

STEP 1:	Tubing Fm ()	Tubing Fm ()	Production Casing Fm ()	Interm Casing	Surface Casing
Record all pressures as found		<u>91</u>	<u>91</u>	<u>-3#</u>	<u>Ø</u>

STEP 3: BRADENHEAD TEST

Elapsed Time (Min:Sec)	Tubing Fm ()	Tubing Fm ()	Prod Casing	Interm Casing	Bradenhead Flow
00:		<u>91</u>	<u>91</u>		<u>Ø</u>
05: <u>1/2 hr.</u>				<u>End Test.</u>	
10:					
15:					
20:					
25:					
30:					
Note instantaneous Bradenhead PSIG at end of test:					<u>Ø</u>

STEP 4: INTERMEDIATE CASING TEST

Buried Valve? No Confirmed open? _____

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:

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

INTERMEDIATE SAMPLE TAKEN (circle)

Yes No Gas Liquid

Character of Intermediate Fluid:

Clear Fresh Salty Sulfur Black _____

Sample Cylinder Number: _____

Elapsed Time (Min:Sec)	Tubing Fm ()	Tubing Fm ()	Production Casing	Intermediate Flow
00: <u>1/2 hr.</u>		<u>91</u>	<u>91</u>	<u>Ø</u>
05: <u>1/2 hr.</u>				<u>End Test.</u>
10:				
15:				
20:				
25:				
30:				
Note instantaneous Intermediate PSIG at end of test:				<u>Ø</u>

Remarks: _____

STEP 5: Send report to BLM within 30 days and to COGC within 10 days. Include wellbore diagram (if not previously submitted or if wellbore configuration has changed since prior diagram). Attach gas and liquid analysis if sampled. See reverse for details.

Test Performed by: JODY GARNER

Title: Tech.

Phone Number: 525-947-4246

and certified true and correct. Jody R. Garner

Date: 5/23/07

Witnessed By: _____

Witness Title: _____

Agency: _____