

FORM

21

Rev 8/99

# State of Colorado Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY

## MECHANICAL INTEGRITY TEST

Fill out Part II of this form if well tested is a permitted or pending injection well. Send original plus one copy.

1. Duration of the pressure test must be a minimum of 15 minutes.
2. A pressure chart must accompany this report if this test was not witnessed by a OGCC representative.
3. For production wells, test pressures must be at a minimum of 300 psig.
4. For injection wells, test pressures must be at 300 psig or minimum injection pressure, whichever is greater.
5. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
6. Do not use this form if submitting under provisions of Rule 328.a. (1) B. or C.
7. OGCC notification must be provided prior to the test.
8. Packers or bridge plugs, etc., must be set within 250 feet of the perforated interval to be considered a valid test.

### Complete the Attachment Checklist

	Oper	OGCC
Pressure Chart	✓	
Cement Band Log		
Tracer Survey		
Temperature Survey		

OGCC Operator Number: 16700		Contact Name and Telephone	
Name of Operator: Chevron USA Inc		Diane L Peterson	
Address: 100 Chevron Road		No: 970-675-3842	
City: Rangely State: CO Zip: 81648		Fax: 970-675-3800	
API Number: 05-103-01051		Field Name: Rangely Weber Sand Unit	
Well Name: A.C. McLAUGHLIN		Field Number: 72370	
Number: 30			
Location (QtrQtr, Sec, Twp, Rng, Meridian): NENW Section 14, T2N, R103W, 6TH P.M.			

☐ SHUT-IN PRODUCTION WELL ☒ INJECTION WELL Facility No.: 150200

### Part I Pressure Test

☒ 5-Year UIC Test ☐ Test to Maintain SI/TA Status ☐ Reset Packer  
☐ Verification of Repairs ☐ Tubing/Packer Leak ☐ Casing Leak ☐ Other (Describe): \_\_\_\_\_

Describe Repairs: \_\_\_\_\_

NA - Not Applicable		Wellbore Data at Time Test		Casing Test <input type="checkbox"/> NA	
Injection/Producing Zone(s)		Perforated Interval: <input checked="" type="checkbox"/> NA		Use when perforations or open hole is isolated by bridge plug or cement plug	
Weber Formation		Open Hole Interval: <input type="checkbox"/> NA		Bridge Plug or Cement Plug Depth	
		6501-6839'			
Tubing Casing/Annulus Test <input type="checkbox"/> NA					
Tubing Size:		Tubing Depth:		Top Packer Depth:	
2 7/8"		6730.3'		6317'	
				Multiple Packers? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Test Data					
Test Date	Well Status During Test	Date of Last Approved MIT	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
4/13/15	Injecting	5/26/2011		1933	
Starting Casing Test Pressure	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Final Casing Test Pressure	Pressure Loss or Gain During Test	
1250		1250	1250	0	
Test Witnessed by State Representative?			OGCC Field Representative:		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			Chuck Browning		

### Part II Wellbore Channel Test

Complete only if well is or will be an injection well.

Indicate method used for cement integrity test, attach appropriate records, charts, or logs unless previously submitted.

☐ Tracer Survey Run Date: \_\_\_\_\_ ☐ CBL or Equivalent Run Date: \_\_\_\_\_ ☐ Temperature Survey Run Date: \_\_\_\_\_

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

Print Name: Diane L Peterson

Form 42 #400814270

Fld Inspection #

6/18/02 853

Signed: \_\_\_\_\_

Diane L Peterson

Title: Permitting Specialist

Date: \_\_\_\_\_

4/13/15

OGCC Approval: \_\_\_\_\_

Chuck Browning

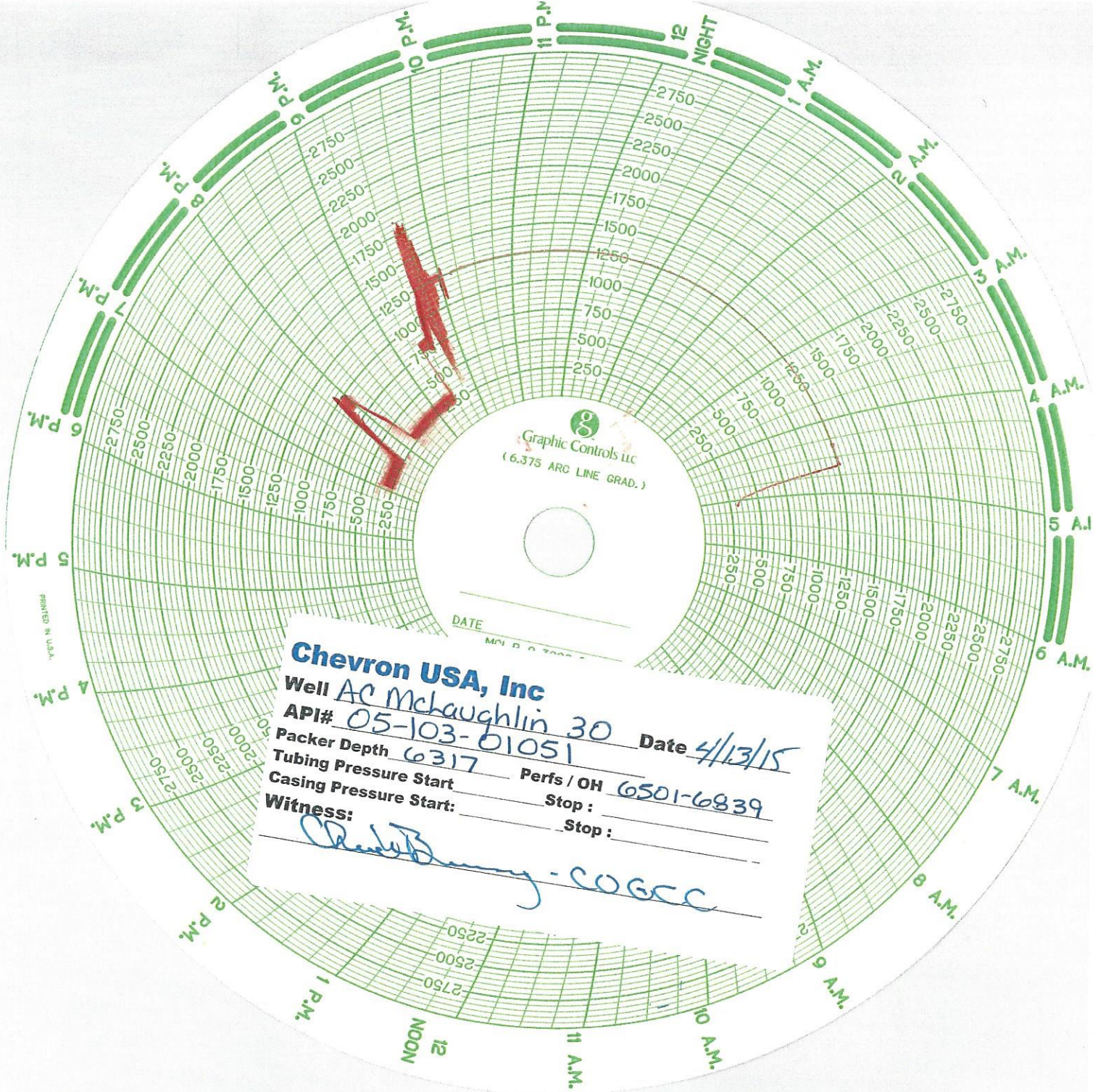
Title: NW Insp

Date: \_\_\_\_\_

4/13/15

Conditions of Approval, if any: \_\_\_\_\_





DATE \_\_\_\_\_  
MIN P. 0 2000

**Chevron USA, Inc**  
Well AC McLaughlin 30 Date 4/13/15  
API# 05-103-01051  
Packer Depth 6317 Perfs / OH 6501-6839  
Tubing Pressure Start \_\_\_\_\_ Stop : \_\_\_\_\_  
Casing Pressure Start: \_\_\_\_\_ Stop : \_\_\_\_\_  
Witness: Chris Bunn - COGCC