

FORM 21 Rev 8/08

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 326.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 Diane L Peterson |
| Name of Operator: Chevron USA Inc | No: 970-675-3842 |
| Address: 100 Chevron Road | Fax: 970-675-3800 |
| City: Rangely State: CO Zip: 81648 | |
| API Number: 05-103-07594 Field Name: Rangely Weber Sand Unit Field Number: 72370 | |
| Well Name: FEE Number: 94X | |
| Location (QtrQtr, Sec, Twp, Rng, Meridian): SENE Sec 33, T2N, R102W, 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: Clean out wellbore, acidize perms, run in hole with new tubing and packer
 Packer depth approval Form 4 - #400844322

| | |
|--|---|
| NA - Not Applicable | Wellbore Data at Time Test |
| Injection/Producing Zone(s) Weber Formation | Perforated Interval: <input type="checkbox"/> NA Open Hole Interval: <input checked="" type="checkbox"/> NA 5584-6332' |

| |
|---|
| Casing Test <input type="checkbox"/> NA Use when perforations or open hole is isolated by bridge plug or cement plug Bridge Plug or Cement Plug Depth |
|---|

| | | | |
|--|--------------------------|------------------------------|--|
| Tubing Casing/Annulus Test <input type="checkbox"/> NA | | | |
| Tubing Size: 2 7/8" | Tubing Depth: 6358.57 | Top Packer Depth: 5391.61 | Multiple Packers? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

| Test Data | | | | | |
|---------------------------------------|------------------------------------|--|------------------------------------|--|----------------------------|
| Test Date 6/10/15 | Well Status During Test SHUT IN | Date of Last Approved MIT 7/30/2012 | Casing Pressure Before Test 0 | Initial Tubing Pressure 0 | Final Tubing Pressure 0 |
| Starting Casing Test Pressure 1300 | Casing Pressure - 5 Min. 1300 | Casing Pressure - 10 Min. 1300 | Final Casing Test Pressure 1300 | Pressure Loss or Gain During Test 0 | |

Test Witnessed by State Representative? YES NO
 OGCC Field Representative: 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.

| | | |
|---|---|--|
| <input type="checkbox"/> Tracer Survey Run Date: _____ | <input type="checkbox"/> CBL or Equivalent Run Date: _____ | <input type="checkbox"/> 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 Doc # 400845110 Field Inspection # 668403099

Signed: Diane L Peterson Title: PERMITTING SPECIALIST Date: 6/10/15

OGCC Approval: Chuck Browning Title: Now Insp Date: 6/10/15

Conditions of Approval, if any:

- Call PLS after test
 - location - good berm / w/ sign



Graphic Controls LLC
 (6.375 ARC LINE GRAD.)

DATE _____
 MCI P 0-3000-8

Chevron USA, Inc
 Well: Fee 94X
 API#: 05-103-07594 Date 6/10/15
 Packer Depth: 5391.6'
 Tubing Pressure Start: _____ Perfs / OH: 5584-6332
 Casing Pressure Start: _____
 Witness: [Signature] Stop: _____
[Signature] - COGCC