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FORM 21 Rev 9/14

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

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MECHANICAL INTEGRITY TEST

- 1. Duration of the pressure test must be a minimum of 15 minutes.
2. An original 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. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressures must be at least 300 psig or average injection pressure, whichever is greater.
6. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
7. Do not use this form if submitting under provisions of Rule 326.a.(1) B. or C.
8. OGCC notification must be provided 10 days prior to the test via Form 42.
9. Packers or bridge plugs, etc., must be set within 100 feet of the perforated interval to be considered a valid test.

Complete the Attachment Checklist

OGCC Operator Number: 47120
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP
Address: 4000 BURLINGTON AVE.
City: EVANS State: CO Zip: 80622
API Number: 05-123-23021 OGCC Facility ID Number:
Well/Facility Name: RLW W Well/Facility Number: 13-14JI
Location QtrQtr: SESW Section: 13 Township: 2N Range: 66W Meridian: 6

Table with columns for Oper and OGCC, and rows for Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, and Inspection Number.

SHUT-IN PRODUCTION WELL
Test Type:
Test to Maintain SI/TA status
Verification of Repairs
5- year UIC
Annual UIC Test
Reset Packer

Describe Repairs or Other Well Activities: SHUT IN PRODUCTION WELL

Wellbore Data at Time of Test
Injection/Producing Zone(s): NIOBRARA, CODELL, J SAND
Perforated Interval: 7260'-7278', 7490'-7500', 7970'-7994'
Open Hole Interval:
Casing Test
Bridge Plug or Cement Plug Depth: 7120' RBP
Tubing Casing/Annulus Test
Tubing Size: Tubing Depth: Top Packer Depth: Multiple Packers?
Test Data
Test Date: 10/28/2015 Well Status During Test: SHUT IN
Casing Pressure Before Test: Casing Pressure Start Test: 420 Casing Pressure - 5 Min.: 419 Casing Pressure - 10 Min.: 418 Casing Pressure Final Test: 417 Pressure Loss or Gain During Test: -3
Test Witnessed by State Representative? [X] Yes [] No
OGCC Field Representative (Print Name): John H. Montoya

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

Print Name: Ed Griebel
Signed: Ed Griebel Title: Sen. Foreman Date: 10/28/2015
OGCC Approval: [Signature] Title: Insp Date: 10/28/2015
Conditions of Approval, if any: