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FORM 21 Rev 9/14

State of Colorado Oil and Gas Conservation Commission



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FOR OGCC USE ONLY
Document Number: 400935205
Date Received: 11/11/2015

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 a at minimum of 300 psig.
4. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressurees 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: 80620
API Number: 05-123-21649 OGCC Facility ID Number:
Well/Facility Name: Kodak Well/Facility Number: 34-32
Location QtrQtr: NWSW Section: 34 Township: 6N Range: 67W Meridian: 6

Table with 2 columns: Attachment, Oper, OGCC. Rows include Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, Inspection Number (671105835).

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

Last MIT Date:

Describe Repairs or Other Well Activities: SI production well, MIT well to return to producion

Wellbore Data at Time of Test
Injection/Producing Zone(s): Codell
Perforated Interval: 7069'-7082'
Open Hole Interval:
Casing Test
Bridge Plug or Cement Plug Depth: 7024'

Tubing Casing/Annulus Test
Tubing Size: Tubing Depth: Top Packer Depth: Multiple Packers? [] Yes [] No

Test Data table with columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure. Values include 360, 360, 360, 360, -0-

Test Witnessed by State Representative? [checked] Yes [] No
OGCC Field Representative (Print Name): John A. 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: 11/19/2015

OGCC Approval: [Signature] Title: Inspector Date: 11/19/2015

Conditions of Approval, if any: