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FORM
21
Rev 3/13

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

OGCC Operator Number: 8960	Contact Name and Telephone Bryan Brown
Name of Operator: Bonanza Creek Energy Inc	No: (720) 440-6100
Address: 410 17th St #1400	Email: bbrown@bonanzacrk.com
City: Denver State: CO Zip: 80202	
API Number: 05-123-13119 Field Name: WATTENBERG Field Number: 90750	
Well Name: GUNTHER Number: 15-31	
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSE 31 5N63W 6	

Complete the
Attachment Checklist

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Other Report 1		
Other Report 2		

☐ SHUT-IN PRODUCTION WELL

☐ INJECTION WELL

Facility No.: _____

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 of Test	Casing Test <input type="checkbox"/> NA
Injection/Producing Zone(s)	Perforated Interval: <input type="checkbox"/> NA Open Hole Interval: <input type="checkbox"/> NA	Use when perforations or open hole is isolated by bridge plug or cement plug
Cod / Nio	6612' / 6324'	Bridge Plug or Cement Plug Depth 500' 6238'

Tubing Casing/Annulus Test <input type="checkbox"/> NA			
Tubing Size: 2.375"	Tubing Depth: 5557'	Top Packer Depth: 500' 6238'	Multiple Packers? <input type="checkbox"/> Yes <input type="checkbox"/> No

Test Data					
Test Date 1/15/16	Well Status During Test TA	Date of Last Approved MIT	Casing Pressure Before Test 0	Initial Tubing Pressure	Final Tubing Pressure
Starting Casing Test Pressure 740	Casing Pressure - 5 Min. 740	Casing Pressure - 10 Min. 740	Final Casing Pressure 740	Pressure Loss or Gain During Test 0	
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			OGCC Field Representative (Print Name): Jeff Rickard		

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

Print Name: Kurt Dodge
Signed: Kurt Dodge Title: Workover Foreman Date: 1/15/16

OGCC Approval: [Signature] Title: Field Insp. Date: 1/15/16

Conditions of Approval, if any:

Imp Doc# 674102882

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