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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

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. Injection wells tests must be witnessed by an 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.

OGCC Operator Number: 17180 Contact Name and Telephone  
Name of Operator: CITATION OIL & GAS CORP Herschel Kennedy  
Address: P.O. Box 690688 No: (719) 340-1150  
City: Houston State: TX Zip: 77200 Email: hkennedy?@cogc.com  
API Number: 05-017-06658 OGCC Facility ID Number: \_\_\_\_\_  
Well/Facility Name: Arapahoe Unit (21-27) Well/Facility Number: 145  
Location QtrQtr: NENW Section: 27 Township: 14S Range: 42W Meridian: 6PM

FOR OGCC USE ONLY

Document Number:  
\_\_\_\_\_

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

Complete the  
Attachment Checklist

	Oper	OGCC
Pressure Chart	<input type="checkbox"/>	<input type="checkbox"/>
Cement Bond Log	<input type="checkbox"/>	<input type="checkbox"/>
Tracer Survey	<input type="checkbox"/>	<input type="checkbox"/>
Temperature Survey	<input type="checkbox"/>	<input type="checkbox"/>
Inspection Number	<input type="checkbox"/>	<input type="checkbox"/>

☐ SHUT-IN PRODUCTION WELL

☒ INJECTION WELL

Last MIT Date: 05/14/2013

Test Type:

☐ Test to Maintain SI/TA status

☐ 5- year UIC

☐ Reset Packer

☒ Verification of Repairs

☐ Annual UIC Test

Describe Repairs or Other Well Activities: Repair casing leak, cement Cheyenne & Dakota aquifers, perforate, acidize & ran new packer & tubing

Wellbore Data at Time of Test

Injection/Producing Zone(s)

Perforated Interval:

Open Hole Interval:

MRRW

5209-30

Casing Test

Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased-hole only with plug back total depth.

Bridge Plug or Cement Plug Depth

Tubing Casing/Annulus Test

Tubing Size:

Tubing Depth:

Top Packer Depth:

Multiple Packers?

2 3/8"

5162

5162

☐ Yes ☒ No

Test Data

Test Date  
06/08/2016

Well Status During Test  
Shut In

Casing Pressure Before Test  
0

Initial Tubing Pressure  
-5" Hg

Final Tubing Pressure  
-5" Hg

Casing Pressure Start Test  
380

Casing Pressure - 5 Min.  
380

Casing Pressure - 10 Min.  
380

Casing Pressure Final Test  
380

Pressure Loss or Gain During Test  
0

Test Witnessed by State Representative?

☒ Yes

☐ No

OGCC Field Representative (Print Name):

Craig Quint

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

Print Name: Herschel Kennedy

Signed: Herschel Kennedy

Title: Sr. Production Foreman

Date: 6/8/16

OGCC Approval: Craig Quint

Title: Region 170 Supervisor

Date: 06/08/2016

Conditions of Approval, if any:

Form 42 # 401054328

Insp Doc # 680000540