

Click here to reset the form

State of Colorado
Oil and Gas Conservation Commission

FORM
21
Rev 9/14



1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)-894-2100 Fax: (303)-894-2109

FOR OGCC USE ONLY

Document Number: _____

Date Received: _____

MECHANICAL INTEGRITY TEST

- Duration of the pressure test must be a minimum of 15 minutes.
- 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.
- For production wells, test pressures must be at a minimum of 300 psig.
- New injection wells must be tested to maximum requested injection pressure.
- For injection wells, test pressures must be at least 300 psig or average injection pressure, whichever is greater.
- A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
- Do not use this form if submitting under provisions of Rule 326.a.(1) B. or C.
- OGCC notification must be provided 10 days prior to the test via Form 42.
- 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: <u>95620</u>	Contact Name and Telephone <u>Tim Crumley</u>
Name of Operator: <u>Western Operating Company</u>	No: <u>(970) 768-5659</u>
Address: <u>1165 Delaware Street, Suite 200</u>	Email: <u>tcrumley@comcast.net</u>
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80204</u>	
API Number: <u>05-121-10585</u> OGCC Facility ID Number: _____	
Well/Facility Name: <u>Grooms</u> Well/Facility Number: <u>1-12</u>	
Location Qtr: <u>SWNE</u> Section: <u>12</u> Township: <u>2N</u> Range: <u>54W</u> Meridian: <u>6th</u>	

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number		

SHUT-IN PRODUCTION WELL INJECTION WELL Last MIT Date: 7/11/2013

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: _____

Wellbore Data at Time of Test			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.	
Injection/Producing Zone(s) <u>JSND</u>	Perforated Interval: <u>4880'-4900'</u>	Open Hole Interval:	Bridge Plug or Cement Plug Depth	
Tubing Casing/Annulus Test				
Tubing Size: <u>2.875</u>	Tubing Depth: <u>4850'</u>	Top Packer Depth: <u>4850'</u>	Multiple Packers? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Data				
Test Date <u>6/12/18</u>	Well Status During Test <u>IS</u>	Casing Pressure Before Test <u>0</u>	Initial Tubing Pressure <u>-2" Hg</u>	Final Tubing Pressure <u>-2" Hg</u>
Casing Pressure Start Test <u>714</u>	Casing Pressure - 5 Min. <u>712</u>	Casing Pressure - 10 Min. <u>711</u>	Casing Pressure Final Test <u>717</u>	Pressure Loss or Gain During Test <u>-3</u>
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		OGCC Field Representative (Print Name): <u>Susan Sherman</u>		

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

Print Name: Tim Crumley
Signed: [Signature] Title: Agent Date: 6/12/18
OGCC Approval: [Signature] Title: Field Inspector Date: 6/12/18

Conditions of Approval, if any:

Insp # 688302013
Form 42 401658050