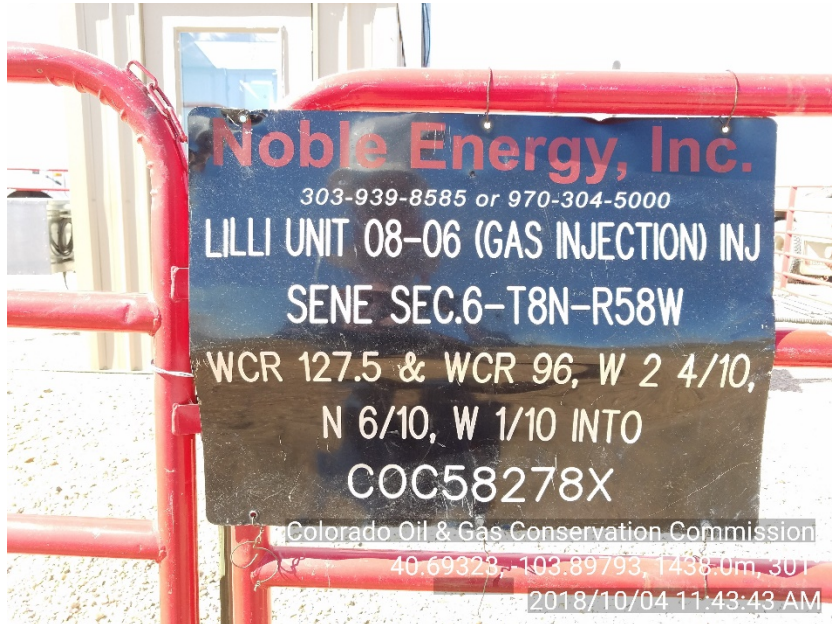


## Inspection Photos

Location Name: Lilli Unit - 68N58W / 6SENE

Location #: 326943



**Photo #1**

**Lilli Unit 8-6** (API 05-123-13900)

Wellsite sign – **UIC-MIT**



**Photo #2**

**Lilli Unit 8-6**

Wellhead – **UIC-MIT**



## Inspection Photos

Location Name: Lilli Unit - 68N58W / 6SENE

Location #: 326943



**Photo #3**

**Lilli Unit 8-6 UIC-MIT**

**Csg. Press prior to test: 0#**



**Photo #4**

**Lilli Unit 8-6 UIC-MIT**

**Csg. Press MIT-Start: 0 min: 590#**



## Inspection Photos

Location Name: Lilli Unit - 68N58W / 6SENE

Location #: 326943



Colorado Oil & Gas Conservation Commission  
40.69322, -103.89798, 1442.0m, 48°  
2018/10/04 11:54:03 AM

**Photo #5**

**Lilli Unit 8-6 UIC-MIT**  
**Csg. Press, 5 min: 580#**



Colorado Oil & Gas Conservation Commission  
40.69323, -103.89797, 1443.0m, 46°  
2018/10/04 11:58:53 AM

**Photo #6**

**Lilli Unit 8-6 UIC-MIT**  
**Csg. Press, 10 min: 580#**



# Inspection Photos

**Location Name: Lilli Unit - 68N58W / 6SENE**  
**Location #: 326943**



Colorado Oil & Gas Conservation Commission  
 40.69324, -103.89798, 1444.0m, 55°  
 2018/10/04 12:03:54 PM

**Photo #7**  
**Lilli Unit 8-6 UIC-MIT**  
**Csg. Press, 15 min, MIT-End : 580#**

Ref. FIR Doc # 6A100572

Click here to reset the form  
**State of Colorado**  
**Oil and Gas Conservation Commission**  
 1120 Lincoln Street, Suite 801, Denver, Colorado 80202 (303) 894-2100 Fax: (303) 894-2158

**MECHANICAL INTEGRITY TEST**

**FORM 21**  
 (Rev. 2014)

FOR OSCC USE ONLY  
 Document Number:  
 Date Received:

1. Duration of the pressure test must be a minimum of 15 minutes.  
 2. An approved pressure test must accompany this report. This test was last submitted by a UICCC representative.  
 3. Injection wells with tests must be witnessed by an OSCC representative.  
 4. For production wells, test pressure must be at least 100 psi or 10% of maximum well pressure.  
 5. Well pressure must be maintained at test pressure throughout the test.  
 6. No production wells, test pressure must be at least 100 psi or 10% of maximum well pressure, whichever is greater.  
 7. In all cases, 300 psi differential pressure must be maintained between the testing and subsurface annulus pressure.  
 8. Do not use this form if submitting under provisions of Rule 204 (1) B, or C.  
 9. OSCC applications must be provided for any well that has been 42.  
 10. Pressure or bridge tests, the results of which are not to be used for the purpose of a well test.

OSCC Operator Number: 1100322 Contact Name and Telephone  
 Name of Operator: Noble Energy Inc Eric Erker No (970) 419-0244  
 Address: 1605 Broadway Ste 2200 Denver, CO 80202 Email: eric.erker@nobleenergy.com  
 City, State, Zip, County: Denver, CO 80202 OSCC Facility ID Number: 49970  
 Well/Facility Name: Lilli Unit Well/Facility Number: 8-6  
 Operator Contact: 303.894.2100 4 (working) 303 (off) 304 (afterhours) 0 (business hours)  
 SHUT-IN PRODUCTION WELL  INJECTION WELL Last MIT Date: 1/13/2013  
 Test Type:  
 Test to Maintain S/LTA Status  5-year UIC  Reset Packer  
 Verification of Repairs  Annual UIC Test  
 Describe Repairs or Other Well Activities:

**Wellbore Data at Time of Test**  
 (Production/Injection/Storage) Production Interval: 6466'-6473' N/A Open Hole Interval:  
 D Sand Bridge Plug or Cement Plug Depth:  
 Tubing Casing/Annulus Test Tubing Size: 2.375" Tubing Depth: 6405' Top Packer Depth: Multiple Packers?  Yes  No

**Test Date**  
 Test Date: 10/04/2018 Well Status: Casing Test Casing Pressure before Test: 392 Initial Casing Pressure: 392  
 Casing Pressure 15 Min: 580 Casing Pressure after Test: 392 Pressure Loss at Time of Test: 10#  
 Test Witnessed by State Representative?  Yes  No OSCC Field Representative (Print Name): Bert Erwin Best Erwin

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.  
 Print Name: Eric M. Erker Title: Assistant Production Foreman Date: 10/04/2018  
 OSCC Approval: Title: Date:  
 Conditions of Approval, if any:

**Photo #8**  
**Lilli Unit 8-6 UIC-MIT**  
**Form 21 - MIT**