

FORM

21

Rev 08/14

State of Colorado

Oil and Gas Conservation Commission

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



Document Number:

401887659

Date Received:

12/28/2018

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 an OGCC representative.
3. For production wells, test pressures must be at a minimum of 300 psig.
4. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressures 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. Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
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

OP OGCC

OGCC Operator Number: 10112 Contact Name Alyssa Beard
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC Phone: (303) 244-8114
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001 Email: regulatory@foundationenergy.co
API Number: 05-103-10455 OGCC Facility ID Number: 272888
Well/Facility Name: COLUMBINE SP FED Well/Facility Number: 9C-15-4-104
Location QtrQtr: SENE Section: 15 Township: 4S Range: 104W Meridian: 6

SHUT-IN PRODUCTION WELL INJECTION WELL Last MIT Date:
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 Injection Producing Zone(s) MVRDC Perforated Interval 1793-1937 Open Hole Interval
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 1740

Table with 5 columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure. Data row: 12-27-2018, SHUT -IN, 0.

Test Witnessed by State Representative? OGCC Field Representative

OPERATOR COMMENTS:

MIT

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

Signed: HSE Manager Print Name: Alyssa Beard
Email: regulatory@foundationenergy.com Date: 12/28/2018

Based on the information provided herein, this Notice (Form 21) complies with COGCC Rules and applicable orders and is hereby approved.
COGCC Approved: Chollett, Shannon Date: 1/2/2019

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401887659	FORM 21 SUBMITTED
401887661	OTHER
401887663	PRESSURE CHART
401887665	FORM 21 ORIGINAL

Total Attach: 4 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)