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FORM 21 Rev 9/14

State of Colorado Oil and Gas Conservation Commission



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FOR OGCC USE ONLY

Document Number:

Date Received:

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.
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 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. 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.

Complete the Attachment Checklist

Attachment Checklist table with columns for Oper and OGCC, and rows for Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, and Inspection Number.

OGCC Operator Number: 17180
Name of Operator: Citation Oil and Gas Corp
Address: 14077 Cutten Road
City: Houston State: TX Zip: 77069
API Number: 05-075-09115 OGCC Facility ID Number: 159177
Well/Facility Name: Arco Sindt Well/Facility Number: 6-15
Location QtrQtr: SWSW Section: 6 Township: 9N Range: 52W Meridian: 6PM

SHUT-IN PRODUCTION WELL [] INJECTION WELL [x]

Last MIT Date: 05/17/2017

Test Type:

- Test to Maintain SI/TA status [] 5-year UIC [] Reset Packer [x]
Verification of Repairs [] Annual UIC Test []

Describe Repairs or Other Well Activities: Clean out to PBTD, Reperforate

Wellbore Data at Time of Test, Tubing Casing/Annulus Test, Test Data, Casing Test, and Test Witnessed by State Representative sections.

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

Print Name: Geoffrey Wolff

Signed: [Signature]

Title: Production Foreman

Date: 1-17-2019

OGCC Approval: [Signature]

Title: OGCC

Date: 1-17-19

Conditions of Approval, if any:

Form 42 # 401902029
Insp Doc # 680304547