

Inspection Photos  
Location Name: Walker 12-4  
API: 05-081-07080

FORM 11  
Rev. 9/14

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Oil and Gas Conservation Commission  
11201 Lincoln Street, Suite 200, Denver, Colorado 80233 (303) 692-1000 (Fax: (303) 694-2100)

**MECHANICAL INTEGRITY TEST**

1. Operation of the pressure vessel must be at a minimum 10% of design pressure.  
2. An original pressure test must be performed within 10 years of the last test and addressed by a 100% representative.  
3. For production wells, test pressure must be at least 1.5 times the design pressure.  
4. For injection wells, test pressure must be at least 1.5 times the design pressure.  
5. A minimum 200 psi differential pressure must be maintained for at least 300 psi or average injection pressure, whichever is greater.  
6. Stop and test the well and maintain the pressure for at least 10 minutes before the testing and tubing testing results are provided.  
7. 100% verification must be provided for the test results for the test and the test results must be provided for the test results.

OSCC Operator Number: 10096  
Name of Operator: SUNN Production Company, LLC  
Address: 10000 E-18th Drive  
City: Spring  
State: TX  
Zip: 77739  
API Number: 04-081-07080  
OSCC Facility ID Number: 04000  
Well/Lease Name: WALKER  
Location Number: 04000  
Well/Lease Number: 12-4  
Well/Lease Name: WALKER  
Location Number: 04000  
Well/Lease Number: 12-4

OSCC Field Representative (Print Name): Emily Waldron

Test Type:  
☒ Test to Maintain S/T/A status  
☐ Verification of Packers  
☐ 5-year UIC  
☐ Annual UIC Test

Describe Any or Other Well Activities:

Wellbore Data at Time of Test  
Injection/Producing Summ: Perforated Interval: Open Hole Interval: Casing Test: Use when perforations or open hole is isolated by bridge plug or cement plug. Use if casing hole only with plug back to seal depth. Bridge Plug or Cement Plug Depth: 3360'

Tubing Casing/Annulus Test  
Tubing Size: Tubing Depth: Top Packer Depth: Multiple Packers? ☐ Yes ☐ No

Test Data  
100 psi: 5/15/19  
7A  
350 psi: 350 psi  
350 psi: 350 psi  
350 psi: 350 psi  
0 psi: 0 psi

Test Witnessed by State Representative? ☐ Yes ☐ No

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

Print Name: Ryan Swadlow  
Signed: Ryan Swadlow  
Title: Field Inspector  
Date: 5-15-19

OSCC Approval: [Signature]  
Conditions of Approval: [Signature]  
Inspection Document # 089802662

05.15.2019 16:03

Photo 1. Photo of test Form 21 as filled out and signed in the field.