

Inspection Photos
Location Name: Cutthroat 12-8
API: 05-081-07270

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State of Colorado
Oil and Gas Conservation Commission
 1120 Lincoln Street, Suite 801, Denver, Colorado 80202 (303) 854-2800 Fax: (303) 854-2109

FORM 21
 Rev 9/14

MECHANICAL INTEGRITY TEST

1. Duration of the pressure test must be a minimum of 35 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 at least 100 psi above the maximum expected production pressure.
 4. For injection wells, test pressures must be at least 100 psi above the maximum expected injection pressure.
 5. For intervention wells, test pressures must be at least 100 psi above the maximum expected intervention pressure.
 6. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure, whichever is greater.
 7. Do not use this form if subsiding or der provisions of Rule 320, N.C. 8 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 300 feet of the packer/bridge plug to be completing a valid test.

OGCC Operator Number: 10396
 Name of Operator: SWN Production Company, LLC
 Address: 10000 Energy Drive
 City: Spring State: TX Zip: 77389
 API Number: 05-081-07270 OGCC Facility ID Number: 28708
 Well/Facility Name: CUTTHROAT
 Location On/Off: SWNW Section: 8 Township: 6N Range: 92W Meridian: 6E
 Contact Name and Telephone: Sydney Hansen
 No: (832) 796-7874
 Email: sydney_hansen@swn.com

Document Number: _____
 Date Received: _____

Complete the Attachment Checklist

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

Test Type:
☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL
☒ Test to Maintain SI/TA status ☐ 5-year UIC
☐ Verification of Repairs ☐ Annual UIC Test ☐ Reset Packer
 Describe Repairs or Other Well Activities: _____

Wellbore Data at Time of Test
 (Injection/Producing Zone(s)) Perforated Interval: _____ 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 to test depth.
 Bridge Plug or Cement Plug Depth: 1846'

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

Test Data

Test Date	Well Status During Test	Casing Pressure Before Test	Wellbore Pressure	Final Casing Pressure
5/16/19	TA	290 psi	NA	NA
Casing Pressure After Test	Casing Pressure - 5 Min	Casing Pressure - 30 Min	Casing Pressure After Test	Annulus Test or Seal During Test
370 psi	370 psi	370 psi	370 psi	0 psi

Test Witnessed by State Representative? ☒ Yes ☐ No
 OGCC Field Representative (Print Name): Emily Waldron

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

Print Name: Russ Suranley
 Signed: _____ Title: _____ Date: 5-16-19
 OGCC Approval: _____ Title: Field Inspector Date: 5/16/19
 Conditions of Approval, if any: _____
 Inspection Document # 689802673

05.16.2019 12:31

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