

Inspection Photos
 Location Name: Brook 14-5
 API: 05-081-07273

FORM 21
 Rev 9/14

Click here to reset the form

State of Colorado
 Oil and Gas Conservation Commission

1130 Lincoln Street, Suite 800, Denver, Colorado 80202 (303) 864-1300 Fax: (303) 484-2709

FOR OGCC USE ONLY
 Document Number: _____
 Date Received: _____

MECHANICAL INTEGRITY TEST

1. Duration of the pressure test shall be a minimum of 30 minutes.
 2. An original pressure test report, according to paragraph 10 of section 10-1-101, shall be submitted to the OGCC representative.
 3. The production well, test pressure shall be at OGCC representative's discretion.
 4. New injection wells, test pressure shall be at OGCC representative's discretion.
 5. For injection wells, test pressure shall be at least 100 psi or average fracture pressure, whichever is greater.
 6. A maximum 50 psi differential pressure shall be maintained between the tubing and the casing annulus.
 7. Do not use this form if subsiding annular pressure or Type III, II, I, or C.
 8. OGCC representative must be provided 12 hours notice to the well on Form 42.
 9. Pressure test shall be performed in accordance with the OGCC representative's instructions.

OGCC Operator Number: 10296
 Name of Operator: SYNN Production Company, LLC
 Address: 10000 Energy Drive
 City: Spring
 State: TX
 Zip: 77388
 API Number: 05-081-07273
 Well/Packery Number: 689602674
 Location Order: SWSW 5
 Township: 6N
 Range: 32W
 Grid E-W: G

Contact Name and Telephone: Sydney Hansen
 No: (332) 796-7874
 Email: sydney_hansen@synn.com

Pressure Chart: _____
 Contact Being Used: _____
 Train Name: _____
 Perforated Interval: _____
 Production Number: _____

OGCC Facility ID Number: 26274
 Well/Wellbore Number: 14-5
 Last MIT Date: 10/20/14

SHUT-IN PRODUCTION WELL INJECTION WELL

Test Type:
 Test to Maintain S/TA status 5-year UIC Reset Packer
 Verification of Repairs Annual UIC Test

Describe Repairs or Other Well Activities: _____

Casing Test
 (For other perforations of open hole is indicated by bridge plug or cement plug, use of casing hole only with plug back hole depth.)
 Bridge Plug or Cement Plug Depth: 2361'

Wellbore Data at Time of Test
 Perforated Interval: _____ Open Hole Interval: _____

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

Test Data

Test Date	Wellbore/Well Test	Initial Casing Pressure	Final Casing Pressure
5/16/19	1A	0 psi	0A
Casing Pressure Start Test	Casing Pressure - 5 Min	Casing Pressure - 15 Min	Pressure Loss or Leak During Test
340 psi	340 psi	340 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 Sigmund
 Signed: _____ Title: Field Inspector
 Date: 5-16-19

OGCC Approval: _____ Title: _____ Date: 5/16/19

Conditions of Approval:
 Inspection Document # 689602674

05.16.2019 13:12

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