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FORM 21 Rev 9/14

State of Colorado Oil and Gas Conservation Commission



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

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 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. 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

OGCC Operator Number: 17180
Name of Operator: Citation Oil & Gas Corp
Address: 14077 Cutten Road
City: Houston State: TX Zip: 77069
API Number: 05-017-06523 OGCC Facility ID Number: 207588
Well/Facility Name: MPU 44-30 Well/Facility Number: 1
Location Qtr: SESE Section: 30 Township: 13S Range: 47W Meridian: 6PM

Table with 3 columns: Attachment, Oper, OGCC. Rows include Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, Inspection Number.

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

Last MIT Date: 06/06/2014

Test Type:

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

Describe Repairs or Other Well Activities:

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: N/A

Wellbore Data at Time of Test

Table with 3 columns: Injection/Producing Zone(s), Perforated Interval, Open Hole Interval. Values: Morrow B, 5370-5374, N/A

Tubing Casing/Annulus Test

Table with 4 columns: Tubing Size, Tubing Depth, Top Packer Depth, Multiple Packers?. Values: 2.875", 5306, 5306, [ ] Yes [X] No

Test Data

Table with 5 columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure. Values: 6/4/19, T/A, 0 PSI, 0 PSI, 0 PSI

Table with 5 columns: Casing Pressure Start Test, Casing Pressure - 5 Min., Casing Pressure - 10 Min., Casing Pressure Final Test, Pressure Loss or Gain During Test. Values: 330 PSI, 330 PSI, 325 PSI, 325 PSI, 5 PSI

Test Witnessed by State Representative?

[X] Yes [ ] No

OGCC Field Representative (Print Name):

Brian Welsh

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: Geoffrey Wolff

Title: Assistant Production Foreman

Date: 6/4/19

OGCC Approval: Brian Welsh

Title: Field Inspector

Date: 6/4/19

Conditions of Approval, if any:

Form 42 # 402054877
Insp Doc # 6926019166