

FORM

21

Rev 08/14

State of Colorado Oil and Gas Conservation Commission

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



Document Number:

402335933

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 an 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. Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
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

OP OGCC

OGCC Operator Number: 10456 Contact Name Kris Gibson
Name of Operator: CAERUS PICEANCE LLC Phone: (970) 309-0010
Address: 1001 17TH STREET #1600
City: DENVER State: CO Zip: 80202 Email: kgibson@caerusoilandgas.com
API Number: 05-045-15109 OGCC Facility ID Number: 293695
Well/Facility Name: N. PARACHUTE Well/Facility Number: MF16C-21 C28 69
Location QtrQtr: NENW Section: 28 Township: 6S Range: 96W Meridian: 6

SHUT-IN PRODUCTION WELL [checked] INJECTION WELL [] Last MIT Date:
Test Type:
[checked] Test to Maintain SI/TA status [] 5-Year UIC [] Reset Packer
[] Verification of Repairs [] Annual UIC TEST
[] Describe Repairs or Other Well Activities:

Wellbore Data at Time of Test
Injection Producing Zone(s) WMFK Perforated Interval 4806-7871 Open Hole Interval
Tubing Casing/Annulus Test
Tubing Size: Tubing Depth: Top Packer Depth: Multiple Packers? []
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 4756

Test Data (Use -1 for a vacuum)
Table with 5 columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure.
Table with 5 columns: Casing Pressure Start Test, Casing Pressure - 5 Min., Casing Pressure - 10 Min., Casing Pressure Final Test, Pressure Loss or Gain.

Test Witnessed by State Representative? [checked] OGCC Field Representative Longworth, Mike

OPERATOR COMMENTS:

[Empty box for operator comments]

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

Signed: [Signature] Print Name: Jason Eckman
Title: Regulatory Analyst Lead Email: jeckman@caerusoilandgas.com Date:

Based on the information provided herein, this Notice (Form 21) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

Att Doc Num

Name

| | |
|-----------|---------------------------|
| 402341376 | FORM 21 ORIGINAL |
| 402341380 | PRESSURE CHART |
| 402341381 | PRESSURE CHART |
| 402341382 | MECHANICAL INTEGRITY TEST |

Total Attach: 4 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)